



CHILD CARE AND DEVELOPMENT FUND PLAN
FOR State of Idaho Department of Health and Welfare
FFY 2008-2009

This Plan describes the Child Care and Development Fund (CCDF) program to be administered by the State of Idaho Department of Health and Welfare for the period beginning October 1, 2007 and ending September 30, 2009. As provided for in the applicable statutes and regulations, the Lead Agency has the authority to modify this program at any time, including the changing of the options selected or described herein.

The official text of the applicable laws and regulations govern this program, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

The burden of public reporting for this collection of information is estimated to be approximately one-hundred and sixty-five (165) hours per response, including the time required to review instructions, gather and maintain the data needed, and review the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires [DATE])

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Hard Copy of Idaho Child Care Application attached at the end of the plan

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FOR THE PERIOD 10/1/07 – 9/30/09

AMENDMENTS LOG

Child Care and Development Services Plan for
For the period: 10/1/07—9/30/09

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

Instructions:

- 1) Lead Agency completes the first three (3) columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column four (4) and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

NOTE: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

PART 1 ADMINISTRATION

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

1.1 Lead Agency Information (as designated by State chief executive officer)

Name of Lead Agency:

Idaho Department of Health and Welfare

Address of Lead Agency:

P.O. Box 83720

Boise, ID 83720-0036

Name and Title of the Lead Agency's Chief Executive Officer:

Richard M. Armstrong, Director

Russell S. Barron, Division Administrator

Phone Number: **(208) 334-5815**

Fax Number: **(208) 334-5817**

E-Mail Address: barronr@dhw.idaho.gov

Web Address for Lead Agency (if any): <http://www.healthandwelfare.idaho.gov>

1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

Name of the State Child Care Contact (CCDF): **Genie Sue Weppner**

Title of State Child Care Contact: **Program Manager**

Address: **P.O. Box 83720**

Boise, ID 83720-0036

Phone Number: **(208)-334-5656**

Fax Number: **(208)-334-5817**

E-Mail Address: weppnerg@dhw.idaho.gov

Phone Number for child care subsidy program information (**for the public, if any**): **(208) 334-5656**. Web Address for child care subsidy program information (**for the public, if any**): <http://www.healthandwelfare.idaho.gov>

1.3 Estimated Funding

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the one (1) year period beginning October 1, 2007 and ending September 30, 2008. (§98.13(a))

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CCDF: \$23,082,014 (includes MOE & State matching portion)
 Federal TANF Transfer to CCDF: \$8,731,981
 Direct Federal TANF Spending on Child Care: \$0
 State CCDF Maintenance of Effort Funds: \$1,175,820
 State Matching Funds: \$3,691,019
 Total Funds Available: \$36,680,834

1.4 Estimated Administration Cost

The Lead Agency estimates that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed five (5) percent): \$ 1,100,000 (3.1%). (658E(c) (3), §§98.13(a), 98.52)

1.5 Administration of the Program

Does the Lead Agency directly administer and implement all services, programs and activities funded under the CCDF Act, including those described in Part 5.1 – Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?

- ☐ Yes.
- ☒ No. If no, use the table below to **identify** the name and type of agency that delivers services and activities. (If the Lead Agency performs the task, mark “n/a” in the box under “Agency.” If more than one agency performs the task, identify all agencies in the box under “Agency,” and **indicate** in the box to the right whether each is a non-government entity.)

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)	
Determines individual eligibility:			
a) TANF families	N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b) Non-TANF families	N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Assists parents in locating care	University of Idaho Center on Disabilities and Human Development	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Makes the provider payment	N/A		
Quality activities	University of Idaho Center on Disabilities and Human Development	X Yes	<input type="checkbox"/> No
Other:		<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the Lead Agency uses outside agencies to deliver services and activities, **describe** how the Lead Agency maintains overall control.

The Department administers all eligibility and payment services directly; the Department contracts quality activities out to private and public agencies. The Department maintains overall control of those contracts through quarterly contract monitoring for each month of the quarter conducted by the Department's Contracts and External Resource Management Team. Contract monitoring efforts include the following:

1. Monitoring compliance with contract requirements, such as
 - a. comparing deliverables with associated timelines;
 - b. reviewing budget and expenditures;
 - c. approving invoices for payment, based on compliance to contract terms; and
 - d. reviewing staffing requirements.
2. Amending contracts as appropriate to reflect changing circumstances throughout the contract life, as agreed to by both parties.
3. Assisting with contract negotiations as warranted.
4. Completing independent reviews of vendor records to
 - a. ensure compliance with record keeping provisions;
 - b. ensure compliance with contract performance standards; and
 - c. settle disputes.
5. Researching and forming opinions about contract -related questions posed by either the vendor or state management.

The University of Idaho Center on Disabilities and Human Development is the Department's Contractor for statewide Resource and Referral services under the name IdahoSTARS.

CDHD, University of Idaho
Julie Fodor, Ph.D.
129 West Third Street
Moscow, ID 83843
(208) 885-3559
jfodor@uidaho.edu

Providers and parents needing resource and referral information can dial 211 and reach Idaho's free information and referral system (Idaho CareLine). Operators who answer the CareLine calls determine the caller's need and connect the caller to a Referral Specialist, the Department, or to a Vendor Specialist. Using this method, parents and providers can get information from anywhere in Idaho at no cost.

1.6 Use of Private Donated Funds

Will the Lead Agency use private funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2)?

- ☐ Yes. If yes, are those funds:
- ☐ Donated directly to the State?
 - ☐ Donated to a separate entity or entities designated to receive private donated funds?

How many entities are designated to receive private donated fund? _____

Provide information below for each entity:

Name:

Address:

Contact:

Type:

- ☒ No.

1.7 Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

1.7.1 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

- ☐ Yes, and:

() The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).

(__ %) Estimated percentage of the MOE requirement that will be met with pre-K expenditures. (Not to exceed 20%.)

If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

- ☒ No.

1.7.2 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))

☐ Yes, and

(__%) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 30%.)

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

☒ No.

1.7.3 If the State answered yes to 1.7.1 or 1.7.2, the following **describes** State efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

1.8 Improper Payments

1.8.1 How does the Lead Agency define improper payments?

The Department defines improper payments as those that are made to ineligible families or providers, as well as payments made for activities that are not countable or for false representation of hours of care or :

- **ineligible families;**
- **activities that are not countable;**
- **providers who are not eligible; or**
- **false representation of hours of care or false representation of residence.**

1.8.2 Has your State implemented strategies to prevent, measure, identify, reduce and/or collect improper payments? (§98.60(i), §98.65, §98.67)

☒ Yes, and these strategies are:

- **To prevent improper payments, the State of Idaho developed a consolidated ICCP parent eligibility unit in August of 2005 which assures that standardized procedures are followed. Cases are reviewed on a routine basis to prevent improper payments. The threat of referral to the fraud unit is considered a preventive measure also.**
- **To measure improper payments, the State of Idaho uses the Q5I, a product of Data Builders (a web-based data collection and reporting tool) which assists in identifying and measuring case accuracy.**
- **To identify improper payments, the consolidated ICCP unit allows the unit supervisor to focus attention specifically on ICCP case reviews. This focus provides for the ability to better identify issues of case accuracy and**

improper payments. When those cases are identified, they are referred to the Fraud Unit for investigation.

- To reduce improper payments, the case reviews conducted by the supervisor of the consolidated ICCP unit helps to reduce the incidences of improper payments that result from inaccurate case work.
- To collect overpayments, referrals are made to the consolidated Revenue Unit as a result of case reviews which identify improper payments and fraud investigation.

Plans are underway to implement the Child Care Bureau's Improper Authorization for Payments Process. Idaho is a tier three state and will begin implementation in SFY 2008.

- ☐ No. If no, are there plans underway to determine and implement such strategies?
- ☐ Yes, and these planned strategies are:
- ☐ No.

PART 2

DEVELOPING THE CHILD CARE PROGRAM

2.1 Consultation and Coordination

- 2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)). **Indicate** the entities with which the Lead Agency has consulted or coordinated (as defined below), by checking the appropriate box(es) in the following table.

Consultation involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).

Coordination involves the coordination of child care and early childhood development service delivery, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health), (3) employment services / workforce development, (4) public education, (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

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	Consultation	Coordination
• Representatives of local government	<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/>
• Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
• Other Federal, State, local, Tribal (if applicable), and private agencies providing child care and early childhood development services.	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
• State/Tribal agency (agencies) responsible for		
○ Public health	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
○ Employment services / workforce development	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
○ Public education	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
○ TANF	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
○ State pre-kindergarten programs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
○ Head Start programs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
○ Programs that promote inclusion for children with special needs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Other (See guidance):	<input type="checkbox"/>	<input type="checkbox"/>

* *Required.*

For each box checked above, (a) identify the agency providing the service and (b) describe the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation.
° If you have prepared an emergency preparedness plan related to your child care and early childhood development services, attach it as **Attachment 2.1.1**.

There is no Attachment 2.1.1 The Department of Health and Welfare is working with the Division of Homeland Security to devise a business continuity plan. The Division of Homeland Security is currently in the “planning to plan” state.

Consultation and Coordination with Representatives of Local Government:
The Department consults and coordinates with representatives from local government and the Governor’s office directly; those entities also participate on the Idaho Child Care Advisory Panel. The Advisory Panel provides information for and input into the Idaho Child Care and Development Fund Plan as it does other Idaho CCDF activities on an ongoing basis. This draft plan was submitted to the Advisory Panel for review and comments, and those comments have been incorporated.

Consultation and Coordination with Indian Tribes/Tribal Organizations:

The Department consults and coordinates with representatives of Idaho Tribes through a quarterly Tribal meeting. We coordinate child care, child support, and TANF activities at these meetings. We recently lost the Tribal representative that served on the Idaho Child Care Advisory Panel and are in the process of recruiting another representative.

Consultation and Coordination with Other Federal, State, local, Tribal, and private agencies providing childhood development services:

The Idaho Child Care Advisory Panel is designed to provide for collaboration among diverse perspectives so that CCDF activities benefit from mutual consultation and coordination. ICCP Advisory Panel membership consists of individuals from the following sectors of the community:

Child Care Providers
Tribal representatives
Hispanic representatives
Department of Education
District Health Departments
Early Childhood Educators
Early Childhood Advocates
Not for Profit Organizations
Parents of children with disabilities
Institutes of Higher Education, Early Child Hood Educators
Private Businesses
Local Licensing Representatives
Representatives from both urban and rural sectors of Idaho
Parents
Governor's office
Head Start

Additional coordination occurs due to the ICCP Program Manager's involvement on other Councils. Currently, the ICCP Program Manager is a member of the Head Start Collaboration Council and the Early Childhood Coordinating Council.

The Idaho Association for the Education of Young Children serves as a subcontractor for the Idaho STARS Professional Development System with the University of Idaho Center on Disabilities and Human Development. Higher education and Department of Education representatives serve on the Idaho Child Care Advisory Panel and participate in the Consortium for the Preparation of Early Childhood Professionals – working to bring quality education curricula to the early child care programs.

Coordination with State/Tribal Agencies Responsible for the following:

- **Public Health:** The Department contracts with seven regional district health offices to monitor child care provider compliance with the ICCP health and safety standards. The Health Districts also provide health consultation and technical assistance. The Health Districts in Idaho operate primarily on public funds; however, a local board that consists of persons appointed by the County Commissioners from each county in the region governs them. Contracting with the districts has provided a positive mechanism to meet a programmatic need for monitoring and educating child care providers. These contractors have developed a standard operating manual so that each Health and Safety Inspector provides the same services using the same procedures across the state. Standard practice has been especially important to align each District Health with the single contractor for Resource and Referral Services. The Health District offices include the following:

Panhandle Health District
8500 N. Atlas Road
Hayden, ID 83835
208-667-3481

North Central District Health
215 10th Street
Lewiston, ID 83501
208- 799-3100

Southwest District Health
920 Main Street
Caldwell, ID 83605-3700
208-455-5317

Central District Health
707 N Armstrong Place
Boise, ID 83704-0825
208-327-8501

South Central District Health
1020 Washington St. North
Twin Falls, ID 83301-3156
208-734-5900

Southeast District Health
1901 Alvin Ricken Drive
Pocatello, ID 83201
208-239-5205

Health District VII
254 E. Street
Idaho Falls, ID 83402-3597
208-522-0310

- **Employment Services/Workforce Development:** The Child Care Program Manager works as the TANF Program Manager and is responsible for Enhanced Work Service (EWS) contracts and Job, Education and Training (JET) contracts. The Program Manager also serves as the Department's liaison with the Workforce Development Council and serves on the local Work Force Investment Board. This provides many opportunities to coordinate work services and child care issues.
- **Public Education:** The Department coordinates with the Department of Education on many aspects of early childhood education. The Department of Education has oversight of the Child Care and Adult Food Program, Chapter 1 Even Start, and Part B Early Intervention Program. The Department has reviewed grants, provided consultation on child care, and funded programs in local school districts that use a combination of these funds.

A consortium of representatives from all the Colleges of Higher Education in the State meet regularly to coordinate Preparation of Early Childhood professionals. They are working on articulation agreements and the ICCP Advisory Panel is asking the Consortium to work to develop early learning guidelines for young children ages 0-3.

- **TANF:** The Department is the Lead Agency for both the TANF and CCDF programs. Through regular program staff meetings, policy for both child care and TANF is coordinated to assure a seamless process for the provision of child care services for TANF families and families transitioning off TANF.
- **State Pre-Kindergarten Programs:** Idaho does not have mandatory Kindergarten; there are no state-funded Pre-K programs. However, Part B Pre-K federal funds are used in every district with Pre-K programs. Coordination is accomplished through Part B representatives membership on the ICCP Advisory Council.
- **Head Start Programs:** There are thirteen Head Start Grantees in Idaho. Coordination efforts include attendance and/or presentations at state association meetings. The Department works with State Head Start Collaborative Offices to facilitate the application process for child care subsidies and to develop funding strategies for Head Start children who need full day/full year child care services. The Idaho Head Start Association has a contract with the Department to sub-contract with Head Start Grantees in Idaho to add additional families to Idaho's current Head Start enrollment. The purpose of the contract is to prepare at-risk children and parents for self-sufficiency; the contract is funded through TANF. Families who receive services are TANF eligible or at risk of becoming eligible, and whose income does

not exceed 200% of the Federal Poverty Guideline. Families who are selected to participate receive the following services:

- Child Development and Health Services
- Family Services (which includes the development of family goals and training opportunities, including parenting and leadership instruction)
- Community Partnerships
- Case Management Services.

- **Programs that promote inclusion for children with disabilities:**
Idaho's Part C program, Idaho Infant Toddler Program, is housed within the Department. The programs work together to increase early intervention referrals and provide parent education on developmentally appropriate child care. IdahoSTARS offers statewide training and technical assistance services. These services include a training component that gives participating child care providers the tools needed to successfully include children with disabilities in their child care settings; it also provides them with a support network as they build an inclusive approach in their homes or centers.

Another effort underway for inclusion of children with disabilities is the ICCP Program Manager's continued participation in the Natural Allies project. This project will address these needs by developing, implementing, evaluating, and disseminating a model that will yield change and improvement in community college coursework and practical experiences related to serving young children with disabilities in inclusive natural environments. CCDF funds are provided to sponsor conferences on inclusion.

2.1.2 State Plan for Early Childhood Program Coordination. *Good Start, Grow Smart* encourages States to develop a plan for coordination across early childhood programs. **Indicate** which of the following best describes the current status of the State's efforts in this area. **Note: Check only ONE.**

- ☐ **Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- ☐ **Developing.** A plan is being drafted.
The draft is included as **Attachment 2.1.2.**
- ☐ **Developed.** A plan has been written but has not yet been implemented.
The plan is included as **Attachment 2.1.2.**
- ☒ **Implementing.** A plan has been written and is now in the process of being implemented. The plan is included as **Attachment 2.1.2.**
- ☐ **Other (describe):**

Describe the progress made by the State planning for coordination across early childhood programs since the date of submission of the 2006-2007 State Plan. Seventy-five percent of the strategies have been implemented.

Indicate whether there is an entity that is responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

The recipient of the Early Childhood and Cross Systems Grant is the Department's Division of Family and Community Services. The Division is responsible for ensuring coordination in conjunction with the Governor's Office.

The following are examples of current coordinated programs:

- **Early Years Conference November 2006:** sponsored by Head Start, Idaho AEYC, CCDF, Children's Mental Health, Idaho Children's Trust Fund, Albertson's Foundation, Department of Education, Environmental Health, Children's Special Health, and Oral Health Program Office.
- **Resource and Referral service for respite care:** CCDF funds referrals and Children's Mental Health funds the care and provides training to providers of respite care services.
- **2-1-1 Idaho CareLine:** All Department funding contributes to support of the Department's 2-1-1 toll free Information and Referral service line which is focused on children.
- **Consortium for the Preparation of Early Childhood professionals** works to articulate courses across Idaho's institutes of higher education, (CDA, vocational degrees, Associates and Bachelors).
- **Early Childhood Information Clearinghouse** is becoming the hub of communication for early childhood in Idaho. The Idaho Careline, Department of Health and Welfare, and the Early Care and Learning Initiative in the Governor's office.

- **The Statewide Early Childhood Plan for Inclusion is being implemented. This involves Easter Seals, State Department of Education, Idaho Parents Unlimited, ((PUL) Health and Welfare, Idaho AEYC, the Early Care and Learning Initiative, and University of Idaho Center for Developmental Disabilities.**
- **Systems of Care Plan for children's mental health. This involves Department of Health and Welfare, Head Start Collaboration Council, BSU Department of Early Childhood, and State Department of Education.**
- **Development of the Early Learning Guidelines which is headed by the Department of Education and Department of Health and Welfare. Stakeholders include higher education, school districts, mental health professionals, Head Start, parents, non-profits, Tribes, Legislators, and Hispanic groups.**

The following are examples of planned coordination:

- **Implementation of the Idaho's Early Care and Learning Plan. This plan mobilizes and coordinates a number of agencies and entities interdependently on child care issues, including an Early Childhood Leadership Academy scheduled for summer of 2007.**
- **Implementation of the Early Care and Learning Cross Systems Taskforce Plan. This plan mobilizes and coordinates a number of agencies and entities interdependently on child care issues, including an Early Childhood Leadership Academy scheduled for summer 2007.**
- **Child Care Licensing. The Department is considering contracting with Idaho AEYC to conduct Child Care Licensing. Currently, licensing is carried out by the Division of Family and Community Services; no CCDF funds are used for this activity.**
- **Pursuit of additional funding. IdahoSTARS continues to seek out funding/grant opportunities to supplement child care initiatives such as those available at the U.S. Department of Education.**
- **Statewide providers' conference. Community partners are planning a statewide conference for private providers focusing on inclusion with an early children training track.**

Describe the results or expected results of this coordination. Coordination helps to maximize the limited resources available for programs and services. In addition, it brings stakeholders together to work on common goals. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

The coordination in developing and owning the guidelines will provide an end result and a product that will be used across systems and programs to promote healthy and safe development for all children and professional development through the higher education programs and the professional development system for child care.

Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

The Department is responsible for ensuring the coordination of early childhood programs through the Early Childhood Coordinating Council. The Department works with the Governor's office in the planning and development of this Grant. Quarterly meetings are held to implement the plan. Representatives from Head Start, Child Care State Administrator, the Developmental Disabilities program, parents, Legislators, United Way, Department of Labor, and Department of Education all serve on the taskforce. The State Child Care Administrator will continue to hold membership on this committee.

2.2 Public Hearing Process

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §98.14(c)) At a minimum, the description must provide:

Date(s) of statewide notice of public hearing:

Notice will be posted on the Department's website:

<http://www.healthandwelfare.idaho.gov> on May 30, 2007.

Newspaper notices will run between May 30, 2007, May 31, 2007 and June 1, 2007.

Notice of this hearing will be published in:

Coeur d'Alene Press - Coeur d'Alene, Idaho

Tribune Publishing - Lewiston, Idaho

Idaho Press Tribune - Nampa, Idaho

Idaho Statesman - Boise, Idaho

The Times News - Twin Falls, Idaho

Idaho State Journal - Pocatello, Idaho

Post Register - Idaho Falls, Idaho

Date(s) of public hearing(s): - June 21, 2007 from 3:30 to 5:30

Hearing site(s): **The Department of Welfare, Pete Cenarrusa Building, 2nd floor Conference Room A, 450 W. State Street Boise, ID 83720-0036**

How the content of the plan was made available to the public in advance of the public hearing(s): **The Plan will be posted on the Department's website and hard copy is available at the Pete Cenarrusa Building 2nd floor.**

A brief summary of the public comments from this process is included as **Attachment 2.2.** (no one attended the public hearing and there are no comments to share)

2.3 Public-Private Partnerships

Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private-sector involvement in meeting child care needs?

- ☒ Yes. If yes, **describe** these activities or planned activities, including the results or expected results.
- ☐ No.

- 1. IdahoSTARS, through the incentive programs, partners with entities like Idaho Parents Unlimited (IPUL) for parent training, Easter Seals for child care provider training, and more than fifty (50) individuals, child care providers, and early child care professionals for mentoring activities. Continuing involvement with United Way across Idaho for the Born Learning Public Awareness Campaign provides opportunities for United Way Board Members and the general public to become more aware and knowledgeable about how important it is to improve early childhood programs. The University of Idaho and the subcontractor Idaho AEYC is required to partner with private businesses to educate and prioritize the importance of quality care for children as it impacts their workforce retention and productivity. The National Children's Trust Alliance and Idaho Children's Trust fund partner with IdahoSTARS for the Strengthening Families Project. IdahoSTARS staff serves on the Boise Metro Chamber of Commerce Non-profit Committee to share information about the professional development system. Partner with the Head Start Collaboration Council through membership on the council. IdahoSTARS partnered with Delta Dental to provide a Child Care Center that serves low-income families with free fluoride rinses to help protect the children's teeth. Partner with Lee Pesky Center (literacy center). Lee Pesky Center provides packets of Literacy to every new parent in Idaho. IdahoSTARS includes child care information in those packets.**
- 2. Expected Results: These partnerships will increase public awareness, opportunities to partner on programming, expand capacity, and provide potential funding opportunities.**

PART 3
CHILD CARE SERVICES OFFERED

3.1 Description of Child Care Services

3.1.1 Certificate Payment System

Describe the overall child care certificate process, including, at a minimum:
(1) a description of the form of the certificate (98.16(k));

The Idaho Child Care Program pays for child care subsidies with a state warrant process through the State Controllers Office. A state warrant is issued directly to the child care provider. The provider is offered the choice to receive a warrant or to receive an electronic fund transfer for direct deposit into their financial account with their choice of financial institution.

(2) a description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), 98.2, 98.30(c)(4) & (e)(1) & (2)) and

After the parent has been determined eligible for child care assistance, the parent chooses a child care provider and a notice is generated at that time. Payments are processed on the last working day of the month for service received during that month. Parents can choose to change providers at any time by reporting that change to their worker. The worker updates the case and future notices and payments will be sent to the new provider.

(3) if the Lead Agency is also providing child care services through grants and contracts, estimate the proportion of §98.50 services available through certificates versus grants/contracts, and explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (98.30(a) & (b)) This may be expressed in terms of dollars, number of slots, or percentages of services.

Attach a copy of your eligibility worker's manual, policy handbook, or other printed guidelines for administering the child care subsidy program as **Attachment 3.1.1**. If these materials are available on the web, the State may provide the appropriate Web site address in lieu of attaching hard copies to the Plan. http://www.healthandwelfare.idaho.gov/portal/alias_Rainbow/lang_en-US/tabID_3374/DesktopDefault.aspx

Note: Eligibility worker's manuals, policy handbooks, or other printed guidelines for administering a child care subsidy program will be used for reference purposes only. Documents provided by Lead Agencies pursuant to

this section will not be uniformly or comprehensively reviewed and will not be considered part of the Plan. All information required to be part of the Plan must continue to be set forth in the Plan.

- 3.1.2 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

☐ Yes, and the following **describes** the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

☒ No.

- 3.1.3 The Lead Agency must allow for in-home care but may limit its use. Does the Lead Agency limit the use of in-home care in any way?

☒ Yes, and the limits and the reasons for those limits are: (§§98.16(g)(2), 98.30(e)(1)(iv))

Idaho limits the use of in-home care only when there are less than three (3) children who need child care. Exceptions to the three (3) child rule can be made when any one (1) of the following special circumstances occur:

- a. The parents' or caretakers' activity occurs during times when out-of-home care is not available.**
- b. The family lives in an area where out- of-home care is not available.**
- c. A child has a verified illness or disability. This would place the child or other children in an out-of-home facility at risk.**

The reason for the limits on in-home care is budgetary. When three (3) or more children are in care, the cost of in-home care does not exceed what we would pay for an out-of-home provider. These special circumstances allow the use of in-home care when other options are not reasonable.

☐ No.

3.1.4 Are child care services provided through certificates, grants and/or contracts offered throughout the State? (658E(a), §98.16(g)(3))

☒

Yes.

☐

No, and the following are the localities (political subdivisions) and the services that are not offered:

3.2 Payment Rates for the Provision of Child Care

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care.

These rates are provided as **See the Child Care Rate chart below.**

The payment rates were or will be effective as of January 1, 2001

Provide a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

- The month and year when the local market rate survey(s) was completed:
January 2007. (§98.43(b)(2))
- A copy of the survey is provided as **Attachment 3.2B**. At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings

There is no "survey instrument." A custom report out of NACCRRAware was created that listed all the fees and age breakdowns queried by Family (excluding Relatives), Group, and Center. The data in NACCRRAware is collected when the provider initially registers with ICCP and on a quarterly basis when the CCR&R makes their quarterly contact. The results of the survey are in the chart below.

- Does the Lead Agency use its **current** Market Rate Survey (a survey completed within the allowable time period –10/1/05 -9/30/07) to set payment rates?

☐

Yes.

☒

No.

At what percentile of the current Market Rate Survey is the State rate ceiling set? If you do not use your current Market Rate Survey to set your rate ceilings or

your percentile varies across categories of care (e.g., type of setting, region, age of children), describe and provide the range of variation in relation to your current survey.

Current Average Percentiles are:

Child Care Center - 62%

Group Home Care - 58%

Family Day Care - 47%

- How the payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey (i.e., describe the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

I

In general, we are not concerned about access to child care as we currently have 2442 providers enrolled in our referral system and 2402 of those providers are enrolled in the Idaho Child Care Program. An attempt was made during 2007 legislative session to make changes in the ICCP program which would result in budget savings that could be used to update the payment rate for providers. We are now in the process of developing new strategies to achieve the savings that would allow us to increase the payment rates.

IDAHO STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/07 – 9/30/09

EFFECTIVE JANUARY 1, 2001

CHILD CARE RATE						
CHILD CARE CENTERS						
REGION	0-12 MONTHS	13-30 MONTHS	31-60 MONTHS	61-72 MONTHS	73+ MONTHS	School-age Rate
I	\$522	\$453	\$396	\$363	\$345	\$266
II	\$493	\$458	\$435	\$414	\$361	\$239
III	\$454	\$390	\$366	\$331	\$331	\$268
IV	\$594	\$539	\$492	\$440	\$440	\$301
V	\$359	\$359	\$352	\$348	\$348	\$247
VI	\$437	\$414	\$368	\$348	\$329	\$294
VII	\$457	\$450	\$417	\$397	\$380	\$290
GROUP HOME CARE						
REGION	0-12 MONTHS	13-30 MONTHS	31-60 MONTHS	61-72 MONTHS	73+ MONTHS	School-age Rate
I	\$414	\$370	\$368	\$368	\$368	\$266
II	\$454	\$431	\$398	\$392	\$374	\$239
III	\$426	\$365	\$348	\$348	\$348	\$268
IV	\$505	\$473	\$460	\$448	\$439	\$301
V	\$348	\$346	\$345	\$344	\$344	\$247
VI	\$373	\$349	\$345	\$345	\$345	\$294
VII	\$368	\$348	\$347	\$347	\$347	\$296
FAMILY DAY CARE						
REGION	0-12 MONTHS	13-30 MONTHS	31-60 MONTHS	61-72 MONTHS	73+ MONTHS	School-age Rate
I	\$453	\$435	\$430	\$430	\$430	\$266
II	\$435	\$420	\$400	\$368	\$368	\$239
III	\$414	\$352	\$348	\$345	\$345	\$268
IV	\$489	\$460	\$460	\$453	\$453	\$301
V	\$355	\$350	\$348	\$348	\$345	\$247
VI	\$411	\$374	\$348	\$348	\$348	\$294
VII	\$384	\$348	\$348	\$345	\$345	\$296

The NACCRRAware database is maintained by the single state Resource and Referral agency, IdahoSTARS. This data is monitored for accuracy as a part of the regular contract monitoring activities carried out quarterly. This has enabled the use of that data to determine market rates.

Both regulated and unregulated child care providers are listed with IdahoSTARS. There is an average of 2500 active programs participating in the Idaho Child Care Program in any given month.

Definitions—Rates

- a. Full-time: 30 or more hours per week (120 hours per month)
- b. Part-time: Regularly scheduled care that is less than 30 hours per week (or 120 per month)
- c. Both: offering both full-time and part-time child care slots at the facility

Definitions—Age Groups Rate Unit—(See attached chart) Fees for specific rates can be entered in whatever manner the facility charges.

The local market rate is broken down by the type of care, age of child and location of the providers. Data from the survey is used to determine the maximum reimbursable rates that can be paid per region. Due to budget concerns, maximum rates have not been changed, but continue to reflect the 75th percentile of the last rate survey. Those rates became effective January 1, 2001. Strategies are being considered that will allow us to raise the market rate in 2008.

- Does the Lead Agency consider any additional facts to determine that its payment rates ensure equal access? (§98.43(d))

☐ Yes. If, yes, **describe**.

☒ No.

- Does the State have a tiered reimbursement system (higher rates for child care centers and family child care homes that achieve one or more levels of quality beyond basic licensing requirements)?

☐ Yes. If yes, **describe**:

☒ No.

3.3 Eligibility Criteria for Child Care

3.3.1 Age Eligibility

Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

☒ Yes, and the upper age is 19.

☐ No.

Children may receive child care benefits until the month of their eighteenth birthday if they are physically or mentally incapable of self-care, as verified by a professional third party. Children may receive child care benefits until the month of their eighteenth birthday if a court order, probation contract, child protection or mental health case plan requires constant supervision.

These children may receive child care benefits until the month of their nineteenth birthday if they are full-time students and are expected to complete secondary school no later than the month of their nineteenth birthday.

Idaho's statewide childcare computer system monitors eligibility.

Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

☒ Yes, and the upper age is nineteen (19).

☐ No.

Children may receive child care benefits until the month of their eighteenth birthday if they are physically or mentally incapable of self-care, as verified by a professional third party. Children may receive child care benefits until the month of their eighteenth birthday if a court order, probation contract, child protection or mental health case plan requires constant supervision.

These children may receive child care benefits until the month of their nineteenth birthday if they are full-time students and are expected to complete secondary school no later than the month of their nineteenth birthday.

Idaho's statewide childcare computer system monitors eligibility.

3.3.2 Income Eligibility

Complete columns (a) and (b) in the matrix below. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

			IF APPLICABLE	
Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) Income Level, lower than 85% SMI, if used to limit eligibility	
			(d) \$/month	(e) % of SMI [Divide (d) by (a), multiply by 100]
1	\$2273.7	\$ 1,933	\$1006	44.2%
2	\$2973.3	\$ 2,527	\$1356	45.6%
3	\$3672.9	\$ 3,122	\$1706	46.4%
4	\$4372.5	\$ 3,717	\$2056	47.0%
5	\$5072.1	\$ 4,311	\$2406	47.4%

Current income eligibility limits are based on 150% of the 1998 Federal Poverty limits and became effective October 1, 1998.

If the Lead Agency does not use the SMI from the most current year, **indicate** the year used:

If applicable, indicate the date on which the eligibility limits detailed in column (c) became or will become effective: **January 2001.**

How does the Lead Agency define “income” for the purposes of eligibility? Describe and/or include information as **Attachment 3.3.2.** (§§98.16(g)(5), 98.20(b)) ICCP HB rule 16..12..200 - 203

All gross earned and unearned income is counted in determining eligibility and the payment amount, unless specifically excluded by rule.

- Is any income deducted or excluded from total family income (for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments)?

☒ Yes. If yes, **describe** what type of income is deducted or excluded from total family income.

The following income sources are not counted as family income:

- **Earned income of a dependent child**
- **Income received for person not residing with the family;**
- **Education funds; cash assistance to meet a specific need from other organizations**
- **Lump sum income, if used to pay medical bills from an accident or used to pay for funeral or burial costs**
- **Loans**
- **TAFI and AABD Benefits**
- **Foster care payments**
- **VISTA payments**
- **Income tax refunds**
- **Earned Income Tax Credits**
- **Travel reimbursements**
- **Tribal income**
- **Foster parent's income**
- **Adoption assistance**
- **Child support payments made by the participant**

☐ No.

- Is the income of all family members included?

☐ Yes.

☒ No. If no, **describe** whose income is excluded for purposes of eligibility determination.

Earned income of a dependent child is excluded.

3.3.3 Eligibility Based Upon Receiving or Needing to Receive Protective Services

Does the State choose to provide child care to children in protective services, as defined in Appendix 2? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

☒ Yes.

☐ No.

Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to

receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

- ☐ Yes.
- ☒ No.
- ☐ Not applicable. CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.

Does the State choose to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))

- ☐ Yes. (**NOTE:** This means that for CCDF purposes the State considers these children to be in protective services.)
- ☒ No.

3.3.4 Additional Eligibility Conditions

Has the Lead Agency established additional eligibility conditions? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

- ☐ Yes, and the additional eligibility conditions are: (Terms must be defined in Appendix 2)
- ☒ No.

3.4 Priorities for Serving Children and Families

- 3.4.1 Complete the table below regarding eligibility conditions and priority rules. For columns (a) through (d), check box if reply is “Yes”. Leave blank if “No”. Complete column (e) if you check column (d).

Eligibility Category	(a) Guarantee subsidy eligibility	(b) Give priority over other CCDF- eligible families	(c) Same priority as other CCDF- eligible families	(d) Is there a time limit on guarantee or priority?	(e) How long is time limit?
Children with special needs	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Children in families with very low incomes	<input type="checkbox"/>		x	<input type="checkbox"/>	
Families receiving Temporary Assistance for Needy Families (TANF)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families transitioning from TANF	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>	
Families at risk of becoming dependent on TANF	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>	

- 3.4.2 **Describe** how the State prioritizes service for the following CCDF-eligible children: (a) children with special needs and (b) children in families with very low incomes. Terms must be defined in Appendix 2. (658E(c)(3)(B))

Families receiving Temporary Assistance for Families in Idaho (TAFI) are automatically eligible for the Idaho Child Care Program. If the need for a waiting list arose, services would be prioritized by: 1) TAFI families; 2) children of low income working families; and 3) special needs children.

- 3.4.3 **Describe** how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting

to transition off TANF through work activities, and (c) those at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Families receiving Temporary Assistance for Families in Idaho (TAFI) are automatically eligible for the Idaho Child Care Program. If the need for a waiting list arose, services would be prioritized by: 1) TAFI families; 2) children of low income working families; and 3) special needs children.

3.4.4 Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

☐ Yes, and the additional priority rules are: (Terms must be defined in Appendix 2)

☒ No.

3.4.5 Does the Lead Agency serve all eligible families that apply?

☒ Yes.

☐ No.

3.4.6 Does the Lead Agency maintain a waiting list?

☐ Yes. If yes, for what populations? Is the waiting list maintained at the State level? Are certain populations given priority for services, and if so, which populations? What methods are employed to keep the list current?

☒ No.

3.5 Sliding Fee Scale for Child Care Services

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on income and the size of the family. A copy of this sliding fee scale for child care services and an explanation of how it works is provided as **Attachment 3.5.1**.

The attached fee scale was or will be effective as of January 2007_.

The monthly rate will be calculated by dividing the yearly rate by twelve (12). Family income for the month of the child care will determine the family share of child care costs. The payment made by the Department will be the allowable local market rate, less the amount calculated using the sliding fee.

We have verified that the automated payment system is calculating the child care payments correctly.

- **Eligible families, except TAFI families participating in non-employment TAFI activities, must pay part of their child care costs.**

If the family is eligible, then the sliding fee schedule is used to determine co-payment amount.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

☐ Yes, and the following **describes** any additional factors that will be used:

☒ No.

3.5.2 Is the sliding fee scale provided in the attachment in response to question 3.5.1 used in all parts of the State? (658E(c)(3)(B))

☒ Yes.

☐ No, and other scale(s) and their effective date(s) are provided as **Attachment 3.5.2.**

The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: **\$ 1706 - 150% of 1998 Federal Poverty Limits**

3.5.3 The Lead Agency must **select ONE** of these options:

- ☐ ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- ☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- ☒ SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The following describes these families:

Families participating in Idaho's TAFI program who are completing non-income producing required activities are not required to make a co-payment. To be eligible for Idaho's TAFI program, the maximum income for a family of three is: \$309 a month – twenty-seven (27) percent of the 1998 Poverty level.

- 3.5.4 Does the State allow providers to charge parents the difference between the maximum reimbursement rate and their private pay rate?

☒ Yes ☐ No

- 3.5.5 The following is an explanation of how the co-payments required by the Lead Agency's sliding fee scale(s) were determined to be affordable: (§98.43(b)(3))

The sliding fee scale ranges from seven (7) percent of the allowable cost of care for families with little or no income to sixty-six (66) percent for families at one hundred and fifty (150) percent of the 1998 Federal Poverty standard. At one hundred (100) percent of poverty, families are responsible for no more than twenty-one (21) percent of the allowable cost of care. Allowable cost is defined as the local market rate or the actual amount billed by the provider, which ever is less. According to the Child Care and Development Fund (ACF 801 Family Profile Idaho families paid an average of 11% percent of income for child care. For those very low income families, they will spend less than 10% of their income for child care.

The Department is carrying rules to the legislature that will increase eligibility limits and smooth the sliding fee scale, as we did last year and the rule failed to pass the legislature. We believe that we will be successful this year.

PART 4

PARENTAL RIGHTS AND RESPONSIBILITIES

4.1 Application Process / Parental Choice

4.1.1 **Describe** the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). At minimum, the description should include:

- How parents are informed of the availability of child care services and about child care options
- Where/how applications are made
- What documentation parents must provide
- How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4
- Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs
- Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies

How Parents are Informed: Idahoans are informed about the Idaho Child Care Program services through a variety of methods. Brochures and posters have been distributed statewide; program information has been disseminated to all known child care providers statewide. Through program coordination efforts at the state and local level, all public agencies serving eligible families have received information regarding access to the program. The Department maintains a web site: <http://www.healthandwelfare.idaho.gov>, with Idaho Child Care Program information.

How Applications are Made: Any person can apply for child care services from the Department. Applications for the Idaho Child Care Program are available at Department offices statewide. Applications can also be requested over the telephone, by mail, or printed as a PDF file from the Department's internet site. Application materials include a cover letter explaining the program and how to apply, the application, the declaration of citizenship/alien status form, and the verification checklist which describes documents needed to verify circumstances. Applicants are informed of child care referral assistance that is available to them free of charge, detailing information about providers and how to select quality child care.

Who Determines Eligibility: The Department of Health and Welfare staff determines program eligibility.

Exceptions to Individual Penalties: The eligibility process includes a discussion about and explanation of the Idaho Child Care Program, including exceptions to the criteria. During a TAFI interview, staff and participants work together to define their individual barriers to employment.

Length of Eligibility Period: Eligibility is for a period of up to six (6) months, based on the family's circumstances.

Steps taken to Reduce Barriers: The Department has consolidated all the parent eligibility function of ICCP into a statewide unit. This consolidation ensures standardized practices statewide, improves efficiency and timeliness of provider payments, and enhances customer service. Regular supervisory case reviews were put in place to reduce worker error. Complaints from both parents and providers have been significantly reduced, as one central point of contact enables prompt attention and resolution of problems.

Attach a copy of your parent application for the child care subsidy program. If the application is available on the web, provide the appropriate Web site address (application must still be attached to Plan): Refer to HW site for application
<http://www.healthandwelfare.idaho.gov>

4.1.2 Is the application process different for families receiving TANF?

☐ Yes. If yes, **describe** how the process is different:

☒ No.

4.1.3 The following is a detailed description of how the State ensures parental choice by making sure that parents are informed about their ability to choose from among family and group home care, center-based care and in-home care including faith-based providers in each of these categories.

The statewide Resource and Referral service is operated by IdahoSTARS. It uses standardized orientation curriculum, standard forms, and one database to identify child care facilities and their characteristics; referral material is consistent and comparable. The NACCRRWare database and website provide information and tools that enable parents to select from any type of provider—family and group home care, center-based care, and in-home care including faith-based providers. IdahoSTARS also tracks provider shortages and works to recruit providers when necessary.

4.1.4 Does the State conduct activities aimed at families with limited English proficiency to promote access to child care subsidies and reduce barriers to receiving subsidies and accessing child care services?

☒ Yes. If yes, **describe** these activities, including how the State overcomes language barriers with families and providers.

The Department has several systems in place to serve families with limited English proficiency, including two full time bilingual workers in the Consolidated Eligibility Unit, a statewide CareLine which includes bilingual staff that are trained to provide information and referrals to callers statewide. Additionally the Department contracts with the nationwide Language Line to provide interpreter and translation services in most of the worlds languages. IdahoSTARS employs a Hispanic Consultant who works statewide to recruit Hispanic providers and facilitate Hispanic families access to child care.

☐ No.

4.2 Records of Parental Complaints

The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

The Department accepts and responds to complaints registered about the quality of child care in day care facilities. The dispositions of all complaints are recorded on a standard complaint form and a register of complaints maintained for public examination. The Department's Division of Family and Community Services is the contact point for child care complaints. There is a Family and Community Services office located in each region.

The Department maintains a record of substantiated parental complaints. Information regarding substantiated parental complaints shall be made available to the public on request, in accordance with the Idaho Public Records Act.

IdahoSTARS is required to maintain a parental complaint log.

When IdahoSTARS receives complaint call, a staff member will record the basic information on the IdahoSTARS electronic "Complaint Intake Form" then forwards it to the Vendor Specialist. The Regional Staff Member fielding a complaint call will record the information in the NACCRRAware database using the Complaint Received action item. The comment section in the NACCRRAware database must include complaint type and the agency (ies) the caller was referred to.

If the Vendor Specialist determines that a provider has three (3) complaints of the same nature in his/her file, she will send a letter to the provider indicating that they will no longer be in our Referral Data Base. A copy of this letter will be sent to the Regional Office for their information if the provider would like a consultation visit/conversation.

IdahoSTARS staff will not investigate child protection issues, health and safety concerns, child care licensing issues, or fraud. We are not a regulatory agency and it is not our role to investigate these complaints.

4.3 Unlimited Access to Children in Child Care Settings

The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

All child care providers sign a self-declaration, including a provision that allows parents unlimited access to their children. Local and state license laws require that parents be afforded unlimited access to their children. The Health Department annually monitors all child care providers receiving CCDF funds for compliance with this requirement. The Health Department investigates complaints received regarding unlimited access.

4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care:

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is: **Idaho Department of Health and Welfare.**

- "appropriate child care":

Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.

- "reasonable distance":
Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.
- "unsuitability of informal child care":
Exceptions will be made on a case by case basis by a reasonable person concept. Reasonable person is defined as whether the conduct would be that of a reasonably prudent person in the same or similar circumstances.
- "affordable child care arrangements":
Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.

PART 5
ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF
CHILD CARE

5.1 Quality Earmarks and Set-Asides

- 5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; describes the expected results of the activities and, if the activities have been ongoing, the actual results of the activities. **For the infant and toddler earmark, the State must note in its description of the activities what is the maximum age of a child who may be served with such earmarked funds (not to exceed 36 months).**

ENTITY: IdahoSTARS PROFESSIONAL DEVELOPMENT SYSTEM (compensation, incentives/provider training)

In July 2003, The Department entered into a contract with IdahoSTARS Professional Development System and Resource and Referral Services. This program offers:

- **Provider registry system for referral use,**
- **Provider training and incentives program to stimulate education and retention,**
- **Tracking and measurements tool, and**
- **Training function to provide for quality trainers and curriculum.**

Those working with infants, toddlers, and school-age children are targeted for participation in this system.

Activities: Professional Development and Resource and Referral

Provider registry system: In order for a provider to participate in the IdahoSTARS professional development system, they must provide data about the ages and number of children they care for and other comparable information. This information is input to the NACCRRAware statewide database and can sort and generate reports based on the preferences of parents – now also cognizant of quality elements in provider services – to produce the most applicable referral list.

Provider training and incentives: This program relies on the research-based assumption that increased training and education relating directly to core competency areas generates increased quality of care for children. Increased quality results in children entering school ready to learn. The system also accommodates the thinking that retention of child care providers and increased wages will have a positive impact on child outcomes. The IdahoSTARS system enables providers to participate in quality training and education activities, increases accessibility to training across the state, provides incentives for completing training, and helps to increase providers' wages.

Tracking: The NACCRRAware database tracks this information and enables the Department to identify the change in education level, experience, and a voluntary Environmental Rating Scale as providers' progress through the levels in the professional development system. This information is also available as part of the referral process. The database provides for measurements in a number of areas, including, but not limited to the following: wages, retention of child care providers, ratio of children to caregivers for Infants and Toddlers, and ratio of school age children to caregivers.

Training and Curriculum: To further the effort to improve quality child care, IdahoSTARS approves trainers and the training curriculum.

Program Details:

Infants and toddlers: Infant/Toddler and school-age tracks are part of the Career path system that allows providers to move between levels based on longevity/experience, training and education, and involvement in the professional development system. Progress between the levels is determined by completing training in the competency areas for each level in one of four tracks that include Infant/Toddler, School Age, Child Development, and School Administrator. Maximum age is three (3).

Resource and referral services: IdahoSTARS provides centralized child care referral services for the whole state. By calling "211" Idaho CareLine toll free from anywhere in Idaho, parents can get personalized referrals through referral staff using NACCRRAware. Last year the NACCRRAware data base was completely updated and all entries standardized. IdahoSTARS has staff located in each region of the state that recruit new providers, provide a standard orientation session for new ICCP eligible providers, recruit new trainers, and assist with scheduling other provider training.

School-age child care: Infant/Toddler and school age tracks are part of the Career path system that allows providers to move between levels based on longevity/experience, training and education, and involvement in the professional development system. Progress between the levels is determined by completing training in the competency areas for each level in one of four tracks that include Infant/Toddler, School Age, Child Development, and School Administrator.

Expected Results:

Increased education and training, increased wages through incentives and bonuses, and recognition for their accomplishments will result in better quality child care in programs that participate.

This project will measure change in quality of settings as assessed through the Harms Environmental Rating Scales for those programs that voluntarily participate in that assessment. It will also measure change as a result of documented goals included in CCR&R consultant encounter forms and the follow up report of completion of those identified changes.

ENTITY: HEALTH DISTRICT (Licensing, compliance activities and provider training).

“Kids in Danger” is a project which continues to be part of the annual ICCP health and safety inspection where health inspectors conduct “Kids in Danger” surveys. In conjunction with the national Consumer Product Safety Commission (CPSC) this project was started in Chicago by a husband and wife in memory of their son who was killed in a child care setting while in a CPSC-recalled portable crib.

Activities: Kids in Danger

The objectives during each on-site facility inspection are as follows:

- (1) Evaluate the source of products for the facility;**
- (2) Evaluate the products within the facility to determine if any are recalled products;**
- (3) Characterize the means by which child care providers obtain information about product safety recalls;**
- (4) Use a standardized choking hazard tester to determine the prevalence of choking hazards within the facility; and**
- (5) Identify ways to enhance knowledge of product recalls and choking hazards among child care providers.**

During the inspection, child care providers are provided resources for obtaining information about product safety recalls and identifying ways to enhance the knowledge of product recalls.

Expected Results:

- **An overall reduction in the number of recalled products identified during the second inspection;**
- **An increased awareness among child care professionals about recalled products; and**
- **Increase knowledge of how to locate information on recalled products.**

5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds) during the 1-year period: October 1, 2007 through September 30, 2008:

\$ _1,420,200_____ (4%)

5.1.3 **Check** each activity the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h))

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Activity	Check if undertaking/will undertake	Name and type of entity providing activity	Check if this entity is a non-governmental entity?
Comprehensive consumer education	<input checked="" type="checkbox"/>	Department of Health and Welfare and IdahoSTARS	<input checked="" type="checkbox"/> only IdahoSTARS
Grants or loans to providers to assist in meeting State and local standards	<input type="checkbox"/>		<input type="checkbox"/>
Monitoring compliance with licensing and regulatory requirements	<input type="checkbox"/>		<input type="checkbox"/>
Professional development, including training, education, and technical assistance	<input checked="" type="checkbox"/>	University of Idaho and Idaho AEYC	<input checked="" type="checkbox"/> Only Idaho AEYC
Improving salaries and other compensation for child care providers	<input checked="" type="checkbox"/>	University of Idaho and Idaho AEYC	<input checked="" type="checkbox"/> Only Idaho AEYC
Activities in support of early language, literacy, pre-reading, and early math concepts development	<input checked="" type="checkbox"/>	University of Idaho and Idaho AEYC	<input checked="" type="checkbox"/> Only Idaho AEYC
Activities to promote inclusive child care	<input checked="" type="checkbox"/>	University of Idaho and Idaho AEYC	<input checked="" type="checkbox"/> Only Idaho AEYC
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children	<input checked="" type="checkbox"/>	University of Idaho and Idaho AEYC	<input checked="" type="checkbox"/> Only Idaho AEYC
Activities that increase parental choice	<input type="checkbox"/>		<input type="checkbox"/>
Other activities that improve the quality of child care (describe below).	<input type="checkbox"/>		<input type="checkbox"/>
Other activities that improve the availability of child care (describe below).	<input type="checkbox"/>		<input type="checkbox"/>
(§98.51(a)(1) and (2))			

The IdahoSTARS program, operated through a contract with the University of Idaho Center for Disabilities and Human Development and a subcontract with Idaho AEYC provides all the activities checked “yes” above.

The Department provides monitoring and technical assistance in support of the IdahoSTARS efforts.

5.1.4 For each activity checked, **describe** the expected results of the activity. If you have conducted an evaluation of this activity, **describe the results**. If you have not conducted an evaluation, **describe** how you will evaluate the activities.

- **Comprehensive Consumer Education:** A standardized packet of parental education materials is provided to all families receiving child care assistance through ICCP. This packet is available at the regional IdahoSTARS offices and at Department offices. Information about the full range of providers available (the Registry and Levels system) 2-1-1 Idaho CareLine, and health and safety requirements in Idaho Child Care Provider settings is available to parents and community members through statewide efforts. These will include information in the Idaho AEYC statewide newsletter, 2-1-1 Idaho CareLine on-line newsletter, ICCP mailings and emails, statewide Early Collaboration list-serve announcements, flyers for school children, PTA bulletins and newsletters, IdahoSTARS and Department websites or links on websites, and church bulletins. A statewide public awareness campaign was implemented using print, radio, and billboards across the state. Information will be provided through the 2-1-1 Idaho CareLine in response to the calls directed there by the afore-mentioned public awareness modalities. Idaho CareLine operators will connect them to the IdahoSTARS office that can provide important information about subsidies, cost, benefit, and incentives to increase quality.
- The expected results of these activities are as follows:
 - More parents will become aware of the Child Care Resource and Referral and the services that are offered.
 - Child care providers will become more aware of the services available to themselves as well as to the families they serve.

Evaluation will be conducted by comparing the numbers of parents contacting the R & R for referrals and the number of child care providers enrolling in ICCP . See attached example in attachment 5.1.4.

Professional development, including training, education, and technical assistance

The following are IdahoSTARS websites: www.idahotc.com and www.idahostars.org.

IdahoSTARS is Idaho's State Training and Registry System. In this capacity, it works as the State's Child Care Resource and Referral administrative agency. Its focus is on improving the quality, affordability, and accessibility of child care in Idaho.

IdahoSTARS Professional Development System (or PDS) provides resources, training, education, scholarships, and incentives to improve the quality of early care and education services in Idaho. This system is possible through the collaboration of state agencies, colleges and universities, non-profits, cities, and other government entities.

Project goals:

- **Standards for the profession will be set.**
- **Systems are in place for progression in professional development.**
- **Support for Early Childhood professionals exists.**
- **Early childhood practitioners will provide quality child care services that support individual child growth and development.**
- **Salaries and other compensation for child care providers will improve.**

The system's incentives component includes the following:

- **Stipends for providers to attend approved training with qualified trainers based on ability to pay;**
- **Bonuses for providers that meet the requirements to move up in the Career Levels system;**
- **Scholarships that support a variety of training opportunities; and**
- **Grants that will be made available to potential trainers interested in creating unique course offerings, to providers to purchase care and educational materials, or for Resource and Referral Offices to purchase items for lending libraries, for mobile vans, or other resources to support care and education providers in their local area.**

The expected outcomes of this activity include the following:

- **Higher levels of staff education and specialized training;**
- **Higher levels of staff compensation;**
- **Reduced staff turnover rates; and**
- **Increased participation in IdahoSTARS from child care professionals.**

Evaluation will be conducted by comparing the numbers of parents contacting the R & R for referrals and the number of child care providers enrolling in ICCP. See attached example in attachment 5.1.4.

Activities in support of early language, literacy, pre-reading, and early math concepts development:

- **Early Care and Learning guidelines supporting language, literacy, and pre-reading and early math concepts represent the core competencies in IdahoSTARS training curricula.**

Expected Outcomes:

- **Increased number of children will be better prepared to enter school.**

Evaluation is not possible at this time as we cannot attribute a causal relationship between IRI (Idaho Reading Inventory) scores and specific children whose child care providers obtained training in literacy. Measures might include the Idaho Reading Initiative assessment that each kindergartner takes upon entering school, (provided a memorandum

of agreement can be achieved with the Department of Education to obtain those results for children cared for in settings participating in the professional development system, and a comparable sample of children in settings not participating in the professional development system). Another measure may include social/emotional assessment of children from each of the above groups. This project will measure change in quality of settings as assessed through the Harms Environmental Rating Scales for those programs that voluntarily participate in that assessment. It will also measure change as a result of documented goals included in CCR&R consultant encounter forms and the follow up report of completion of those identified changes.

Inclusive Child Care

IdahoSTARS incentive system rewards providers who are providing care for children with disabilities.

IdahoSTARS and the Division of Welfare are working with the Division of Medicaid to identify a process that would allow child care providers who provide services to children with disabilities to be compensated through Medicaid payments.

Expected Outcomes:

- More providers will be willing to care for children with disabilities.

Evaluation will be conducted by reporting the numbers of willing providers on IdahoSTARS quarterly report.

Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children.

The Healthy Child Care Idaho project has been incorporated into the IdahoSTARS project as one of the core training components, (requiring a sixty (60) hour curriculum in the above modules for CCR&R consultants, Regional and Field Mentors, and others that work directly with child care programs). IdahoSTARS has produced a Child Care Health Consultant training as an on-line course to increase access for those in rural areas that are not close to a trainer.

Expected Outcomes:

- Trained Health Care Consultants in Idaho; and
- Information on child care health and safety available to early childhood professionals.

Evaluation will be conducted by tracking the number of trained Health Care Consultants in Idaho. Attachment 5.1.4

5.2 Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, each Lead Agency is asked to assess its State's progress toward developing voluntary guidelines on language, literacy, pre-reading, and early math concepts and a plan for the education and training of child care providers. The third component of the President's *Good Start, Grow Smart* initiative, planning for coordination across at least four early childhood programs and funding streams, was addressed in Section 2.1.2.

5.2.1 Status of Voluntary Early Learning Guidelines. Indicate which of the following best describes the current status of the State's efforts to develop, implement, or revise research-based early learning guidelines (content standards) for three to five year-olds. **NOTE: Check only one box to best describe the status of your State's three-to-five-year-old guidelines.**

- ☐ **Planning.** The State is planning for the development of early learning guidelines. Expected date of plan completion: _____
- ☐ **Developing.** The State is in the process of developing early learning guidelines. Expected date of completion: _____
- ☐ **Developed.** The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as **Attachment 5.2.1.**
- ☐ **Implementing.** In addition to having developed early learning guidelines, the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as **Attachment 5.2.1.**
- ☒ **Revising.** The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as **Attachment 5.2.1.**
- ☐ **Other (describe):**

Describe the progress made by the State in developing, implementing, or revising early learning guidelines since the date of submission of the 2006-2007 State Plan. **A group of individuals have begun to work on revising and aligning these guidelines with the current K-12 standards and expanding the guidelines to include birth to five (5), enhancing the existing standards for three (3) to five (5) year olds. Their first meeting was held in May 2007.**

A copy of the guidelines can be found at

<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

If developed, are the guidelines aligned with K-12 content standards or other standards (e.g., Head Start Child Outcomes, State Performance Standards)?

☒ Yes. If yes, **Idaho Early Learning Standards**
<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

☐ No.

If developed, are the guidelines aligned with early childhood curricula?

☒ Yes. If yes, **describe.**

The Professional Development System for Child Care Programs aligns with the current guidelines, and will conform to the revised guidelines when they are complete. However, Idaho does not have early childhood curricula with the exception of Special Education curricula.

☐ No.

Have guidelines been developed for children in the following age groups (check if guidelines have been developed):

☐ Birth to three. Guidelines are included as Attachment 5.2.1
Birth to five. Guidelines are included as Attachment 5.2.1
Five years or older. Guidelines are included as Attachment 5.2.1

None of the above, we have guidelines for 3 to 5.

Efforts to develop early learning guidelines for children that may differ from those addressed in *Good Start, Grow Smart* (i.e., children birth to three or older than five) may be described here.

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

5.2.2 Domains of Voluntary Early Learning Guidelines. Do the guidelines for children three-to-five-years-old address language, literacy, pre-reading, and early math concepts?

☒ Yes.

☐ No.

Do the guidelines for children three-to-five-years-old address domains not specifically included in *Good Start, Grow Smart*, such as social/emotional, cognitive, physical, health, creative arts, or other domains?

☐ Yes. If yes, **describe**.

☒ No.

5.2.3 Implementation of Voluntary Early Learning Guidelines. Indicate the strategies the State used or expects to use in **implementing** its early learning guidelines.

Guidelines have been imbedded in the core components of Professional Development career pathway which also includes emphasis on cultural diversity. See web site

<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

Check all that apply:

- ☐ Disseminating materials to practitioners and families
- ☒ Developing training curricula
- ☒ Partnering with other training entities to deliver training
- ☒ Aligning early learning guidelines with licensing, core competencies, and/or quality rating systems
- ☐ Other - Describe:

Indicate the stakeholders that are (or expect to be) actively supporting the implementation of early learning guidelines.	Indicate the programs that mandate or require the use of early learning guidelines.
<input type="checkbox"/> Publicly funded (or subsidized) child care	<input type="checkbox"/> Publicly funded (or subsidized) child care
<input checked="" type="checkbox"/> Head Start	<input type="checkbox"/> Head Start
<input type="checkbox"/> Education/Public pre-k	<input type="checkbox"/> Education/Public pre-k
<input checked="" type="checkbox"/> Early Intervention	<input type="checkbox"/> Early Intervention
<input checked="" type="checkbox"/> Child Care Resource and Referral	<input type="checkbox"/> Child Care Resource and Referral
<input type="checkbox"/> Higher Education	<input type="checkbox"/> Higher Education
<input type="checkbox"/> Parent Associations	<input type="checkbox"/> Parent Associations
<input type="checkbox"/> Other. Describe:	<input type="checkbox"/> Other. Describe:

How are (or will) cultural, linguistic, and individual variations (be) acknowledged in implementation?

Guidelines have been imbedded in the core components of Professional Development career pathway which also includes emphasis on cultural diversity. See web

<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

How are (or will) the diversity of child care settings (be) acknowledged in implementation?

Guidelines have been imbedded in the core components of Professional Development career pathway which also includes emphasis on cultural diversity. See web site

<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

Materials developed to support implementation of the guidelines are included as **Attachment 5.2.3**. If these are available on the web, provide the appropriate Web site address:

<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

- 5.2.4 **Assessment of Voluntary Early Learning Guidelines.** As applicable, **describe** the State's plan for:
- (a) Validating the content of the early learning guidelines
 - (b) Assessing the effectiveness and/or implementation of the guidelines
 - (c) Assessing the progress of children using measures aligned with the guidelines
 - (d) Aligning the guidelines with accountability initiatives

This is not being done, but to the extent they are embedded in the core components of the Professional development system, they will be measured through the evaluation of key quality indicators through voluntary participation in ECCRS assessments.

Written reports of these efforts are included as **Attachment 5.2.4**. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan): **NA**

5.2.5 State Plans for Professional Development. **Indicate** which of the following best describes the current status of the State's efforts to develop a professional development plan for early childhood providers that includes all the primary sectors: child care, Head Start, and public education. **NOTE: Check ONLY ONE box to best describe the status of your State's professional development plan.**

- ☐ **Planning.** **Indicate** whether steps are under way to develop a plan. If so, describe the entities involved in the planning process, time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- ☐ **Developing.** A plan is being drafted. The draft or planning documents are included as **Attachment 5.2.5.**
- ☐ **Developed.** A plan has been written but has not yet been implemented. The plan is included as **Attachment 5.2.5.**
- ☒ **Implementing.** A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as **Attachment 5.2.5. (contract with the University of Idaho/IdahoSTARS).**
- ☐ **Revising.** The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 06-07 State Plan. The revisions or the revised plan are included as **Attachment 5.2.5.**
- ☐ **Other (describe):**

Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2006-2007 State Plan.

We only have a scope of work and have attached frequently asked questions on the scope of work attachment for more information.

The contractor has implemented the following:

- **Professional Development Career Lattice.**
- **Idaho Stars enrolls provider for referral**
- **Providers who are enrolled are tracked in NACCRRWare.**
- **Consolidated provider enrollment in one office for the entire state.**
- **Consolidated R&R services for the state.**
- **Established regional offices to coordinate and provide training for parents and providers.**
- **Established and implemented an incentive and scholarship payment system with providers enrolled in the professional development system.**
- **Environmental scans available to providers who are interested. Based on the environmental rating, providers receive grants and incentives to improve upon their lowest rated item.**

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- A quality rating system is developed and is being piloted with 200 providers across the state.
- A strengthening families grant and component has been added to the professional development system training.

If your State has developed a plan for professional development, does the plan include (Check EITHER yes or no for each item):

	Yes	No
<p>Specific goals or desired outcomes: – <u>Increasing affordability</u> by providing child care providers enrollment and registration services for ICCP and updating of this information on a regular basis.</p> <p><u>Part 2 – Improving accessibility</u> with resources and referrals for parents seeking child care through the Idaho CareLine 2 – 1 – 1 or 1-800-926-2588, collecting and maintaining data on providers, recruiting child care and ICCP providers, encouraging cultural sensitivity and inclusion, and ensuring an equitable distribution of providers statewide.</p> <p><u>Part 3 – Improving Quality</u> by providing new opportunities for training and professional development for all child care providers. The project will evaluate trainers and establish training standards and approve trainings. The project will award financial incentives for achieving levels of training and certification, length of service in the child care profession, and utilization of skills learned in training and certification processes in the child care setting.</p> <p><u>Part 4 – Evaluating the outcomes</u> identified in the work plan conducted by an independent evaluation specialist. The evaluation will consist of assessments of: 1) the quality of training and education received by participants; 2) the impact of training on child care and education programs; 3) perceptions of families and children and others in child care and education services; and 4) perceptions of all consumers related to satisfaction with customer service, professionalism, timeliness, responsiveness, organization, and quality of all aspects of the project.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A link to Early Learning Guidelines : Standards for the content of training to reflect the Idaho State Department of Education’s Idaho Early Learning Standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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<p>1) Continuum of training and education to form a career path: Career Lattice System (Idaho Career Path for Early Childhood Professionals)</p> <ul style="list-style-type: none"> a. A framework of progressive roles and levels identifies pathways between these levels b. Details the amount of training/education and experience needed to qualify for that role. c. First level, or entry-level, will correspond to the minimum requirement set by licensing d. A “Lattice” provides opportunities for lateral and vertical career moves e. Defining core areas of knowledge and core competencies <ul style="list-style-type: none"> i. Defining what teachers need to know and be able to do ii. Specifying content in training requirements iii. Basis for professional development programs iv. Articulation agreements 	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>2) Articulation from one type of training to the next: Credentialing and Certification System – Higher Education Policies</p> <ul style="list-style-type: none"> a. College credit for community-based training, including CDA course work b. Articulation agreements to transfer credits into and from 2 and 4 year degree programs c. Prior learning approval – giving credit for the demonstration of competencies gained through life and prior work experiences toward the requirements of a degree 	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>Quality assurance through approval of trainers: University of Idaho approves the trainers, maintains the qualifications and criteria for approved trainers, and maintains the training registry.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>Quality assurance through approval of training content: University of Idaho evaluates and approves the training content.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>A system to track practitioners’ training: University of Idaho Training Registry. See www.idahotc.com for more information</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>Assessment or evaluation of training effectiveness: University of Idaho Training Registry has an evaluation component for every training. See www.idahotc.com for more information</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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State Credentials – State for which roles (e.g. infant and toddler credential, directors’ credential, etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Specialized strategies to reach family, friend and neighbor caregivers	<input type="checkbox"/>	<input type="checkbox"/>

For each **Yes** response, **reference** the page(s) (no pages) in the plan and briefly **describe**.

See Professional Development Description in Attachment 5.2.6 Career Lattice and Incentive Structure

For each **No** response, **indicate** any plans the Lead Agency has to incorporate these components.

There are no plans to develop State Credentials, however Idaho STARS is still working closely with the Consortium for the Preparation of Early Childhood Professionals, which consists of early childhood educators, university, community college instructors in early childhood education and community partners to develop articulation agreements among the colleges and coordinate Early Child Care Professionals training standards.

Are the professional development opportunities described in the plan available:

Note: Check either yes or no for each item):

	Yes	No
Statewide	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Center-based Child Care Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Group Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Family Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To In-Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (describe): Relative Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.

The contract itself does not address these concepts specifically.

Are program or provider-level incentives offered to encourage provider training and education?

☒ Yes. If yes, **describe**, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.

See the career lattice and incentive structure in Attachment 5.2.6

- ☐ No. If no, **describe** any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes?

- ☒ Yes. If yes, **describe** how the professional development plan's effectiveness/goal is assessed.
Assessment is being conducted through environmental scans using ECCRS. This is strictly voluntary and we provide incentives to providers who volunteer to participate.
- ☐ No. If no, **describe** any plans to include assessments of the professional development plan's effectiveness/goal achievement.

Does the State assess the effectiveness of specific professional development initiatives or components?

- ☐ Yes. If yes, **describe** how specific professional development initiatives or components' effectiveness is assessed.
- ☒ No. If no, **describe** any plans to include assessments of specific professional development initiatives or components' effectiveness.
We have no specific professional development initiatives.

As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?

- ☒ Yes. If yes, **describe** how assessment informs the professional
Feed back from the providers experience with the ECCRS assessment provides IdahoSTAR with information to adjust their training.
- ☐ No. If no, **describe** any plans to include assessment to inform the professional development plan.

PART 6
HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: <http://nrc.uchsc.edu/>.

6.1 Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F), §§98.41, §98.16(j))

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation?

- ☒ Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.
- ☐ No. If no, **describe** which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

6.1.2 Have center licensing requirements as they relate to staff-child ratios, group size, or staff training been modified since approval of the last State Plan?
(§98.41(a)(2)&(3))

- ☐ Yes. If yes, **describe** the changes.
- ☒ No.

6.1.3 For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

6.2 Health and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

☒ Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.

☐ No. If no, **describe** which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.

6.2.2 Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

☐ Yes. If yes, **describe** the changes.

☒ No.

6.2.3 For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

6.3 Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

☐ Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.

☒ No. If no, **describe** which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.

Family child care providers who care for six (6) or fewer children are exempt from licensing under State law, but may be subject to more stringent local licensing laws.

6.3.2 Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

☐ Yes. If yes, **describe** the changes.

☒ No.

6.3.3 For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

All child care providers, including center-based, group home, family home, in-home providers, and relatives must submit a self-declaration/written statement that they comply with the health and safety requirements listed in Subsections 251.01 through 251.10 of these rules. The provider must agree to a health and safety inspection. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law. (4-1-2002)

01. Age of Provider. All child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. (10-1-98)

02. Sanitary Food Preparation. Food for use in child care facilities must be prepared and served in a sanitary manner. Utensils and food preparation surfaces must be cleaned and sanitized before using to prevent contamination. (10-1-98)

03. Food Storage. All food served in child care facilities must be stored to protect it from potential contamination. (10-1-98)

04. Hazardous Substances. Medicines, cleaning supplies, and other hazardous substances must be stored out of the reach of children. (10-1-98)

05. Emergency Communication. A telephone or some type of emergency communication system is required. (10-1-98)

06. Smoke Detectors, Fire Extinguisher and Exits. A properly installed and operational smoke detector must be on the premises where child care occurs. Adequate fire extinguishers and fire exits must be available on the premises. (10-1-98)

07. Hand Washing. Each provider shall wash his hands with soap and water at regular intervals, including before feeding, after diapering or assisting children with toileting, after nose wiping, and after administering first aid. (10-1-98)

08. CPR/First Aid. Providers shall insure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor. (10-1-98)

09. Health of Provider. Each provider shall certify that he/she does not have any physical or psychological condition that might pose a threat to the safety of a child in his/her care. (10-1-98)

10. Child Abuse. Providers must report suspected child abuse to the appropriate authority. (10-1-98)

6.4 Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.4.1 Are all in-home child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?

☐ Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.

☒ No. If no, **describe** which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3.

All in-home child care providers are exempt from licensing under Idaho State law.

6.4.2 Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

☐ Yes. If yes, **describe** the changes.

☒ No.

6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

All child care providers, including center-based, group home, family home, in-home providers, and relatives must submit a self-declaration/written statement that they comply with the health and safety requirements listed in Subsections 251.01 through 251.10 of these rules. The provider must agree to a health and safety inspection. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law. (4-1-2002)

01. Age of Provider. All child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. (10-1-98)

02. Sanitary Food Preparation. Food for use in child care facilities must be prepared and served in a sanitary manner. Utensils and food preparation surfaces must be cleaned and sanitized before using to prevent contamination. (10-1-98)

03. Food Storage. All food served in child care facilities must be stored to protect it from potential contamination. (10-1-98)

04. Hazardous Substances. Medicines, cleaning supplies, and other hazardous substances must be stored out of the reach of children. (10-1-98)

05. Emergency Communication. A telephone or some type of emergency communication system is required. (10-1-98)

06. Smoke Detectors, Fire Extinguisher and Exits. A properly installed and operational smoke detector must be on the premises where child care occurs. Adequate fire extinguishers and fire exits must be available on the premises. (10-1-98)

07. Hand Washing. Each provider shall wash his hands with soap and water at regular intervals, including before feeding, after diapering or assisting children with toileting, after nose wiping, and after administering first aid. (10-1-98)

08. CPR/First Aid. Providers shall insure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor. (10-1-98)

09. Health of Provider. Each provider shall certify that he/she does not have any physical or psychological condition that might pose a threat to the safety of a child in his/her care. (10-1-98)

10. Child Abuse. Providers must report suspected child abuse to the appropriate authority. (10-1-98)

6.5 Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A))

Indicate the Lead Agency's policy regarding these relative providers:

- ☒ **All** relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.
- ☐ **All** relative providers are **exempt** from all health and safety requirements.
- ☐ **Some or all** relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following describes those requirements and identifies the relatives they apply to:

6.6 Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:

- Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
 - ☐ Yes. If yes, **indicate** which providers are subject to routine unannounced visits and the frequency of those visits:
 - ☒ No.
- Are child care providers subject to background checks?
 - ☒ Yes. If yes, **indicate** which types of providers are subject to background checks and when such checks are conducted: **Once, at the time of licensing.**

State licensing requires criminal history checks for all applicants, owners, employees, and volunteers (providing more than twelve (12) hours volunteer service per month) and all other individuals twelve (12) years of age or older who have unsupervised direct contact

with children for Centers and Group Homes. The criminal history check includes a review of the following records:

- Statewide criminal identification bureau check,
- Federal bureau of investigation criminal history,
- National criminal information center, and
- Statewide child abuse register.

☐ No.

- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

☐ Yes. If yes, **describe** the State's reporting requirements and how such injuries are tracked (if applicable):

☒ No.

- Other methods used to ensure that health and safety requirements are effectively enforced:

6.7 Exemptions from Immunization Requirements

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):

- ☐ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- ☐ Children who receive care in their own homes.
- ☒ Children whose parents object to immunization on religious grounds.
- ☒ Children whose medical condition contraindicates immunization.

PART 7
HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

(Only the Territories complete Part 7)

7.1 Health and Safety Requirements for Center-Based Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all center-based care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.2 Health and Safety Requirements for Group Home Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all group home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.3 Health and Safety Requirements for Family Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all family child care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.4 Health and Safety Requirements for In-Home Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all in-home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.5 Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care). (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

- ☒ **All** relative providers are subject to the same requirements as described in sections 7.1 - 7.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.
- ☐ **All** relative providers are **exempt** from all health and safety requirements.
- ☐ **Some or all** relative providers are subject to **different** health and safety requirements from those described in sections 7.1 - 7.4 and the following describes those different requirements and the relatives they apply to:

7.6 Enforcement of Territorial Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how Territorial health and safety requirements are effectively enforced: Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?

- ☐ Yes. If yes, **indicate** which providers are subject to routine unannounced visits and the frequency of those visits:
- ☐ No.

Are child care providers subject to background checks?

☐ Yes. If yes, **indicate** which types of providers are subject to background checks and when such checks are conducted:

☐ No.

Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

☐ Yes. If yes, **describe** the Territory's reporting requirements and how such injuries are tracked (if applicable):

☐ No.

Other methods used to ensure that health and safety requirements are effectively enforced:

7.7 Exemptions from Territorial Immunization Requirements

The Territory assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1))

The Territory exempts the following children from immunization (check all that apply):

- ☐ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- ☐ Children who receive care in their own homes.
- ☐ Children whose parents object to immunization on religious grounds.
- ☐ Children whose medical condition contraindicates immunization.

APPENDIX 1

PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

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- (3) it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following *italicized* terms. (658P, 658E(c)(3)(B))

- *attending* (a job training or educational program; include minimum hours if applicable) - Child care must be needed so the caretaker/parent may attend an education or training program
- *in loco parentis* –Assuming care and custody of a child by an adult not related to the child. When the parents have made an agreement for another individual to care for their child (both formally and informally); the individual will be eligible to apply for benefits. The temporary caretaker must meet all eligibility requirements. This applies to both family relatives and non-relative caretakers.
- *job training and educational program* - An education program is defined as job training or education program, including high school, junior college, college, GED, technical school and vocation programs.
- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) -Any child who is physically or mentally not capable of self-care, as verified by a physician, licensed psychologist, social worker, special education teacher, speech therapist, or by receiving Supplemental Security Income (SSI).
- *protective services* -Child care is required to permit the family to receive services needed to reduce or eliminate the need for protective intervention. The Department has final approval for all protective service referral. Children in foster care are not eligible for these services.
- *residing with* - The family will include any of the following that reside within the household:
 - A. Parent- person legally responsible for child(ren) because of birth, adoption or legal guardianship.
 - B. Stepparent a person married to the child's parent who has no biological or adoptive relationship.
 - C. Unmarried partner- persons not married to each other but whose common child lives in the home.
 - D. No-Parent caretaker- adult caretaker, other than a parent, who is related by blood or marriage, including grandparents, great-grandparents, brother, sister, aunt, uncle, nephew, niece, or first cousin. Relatives by marriage would include stepsiblings.

E. Child(ren)- all children under eighteen, years of age if they are related to the parent or caretaker as specified above. Children over eighteen, years of age if claimed as a tax-dependent by child's caretaker or parent.

F. Tax dependent- other persons living in the home who are claimed a tax dependent by the child's caretaker.

G. A child placed in foster care by a public or private agency.

- *special needs child* -Any child with physical, mental, emotional, behavioral disabilities, or developmental delays covered by state statutes or Individual Education Plan (IEP) or a Family Service Case Plan. (There is not a waiting list for child care in Idaho. We have not had to prioritize special needs care. If the market changes and there is a need in the future, we will certainly address the needs of these children.)
- *very low income* -Family income is less than 150% of the Federal Poverty limit.
- *working* (include minimum hours if applicable) -A job paying wages or salary, including work paying commission or in-kind compensation. This also includes full or part-time participation in the VISTA program.
- Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

Families receiving Temporary Assistance for Families in Idaho (TAFI) - These are families eligible and receiving for cash assistance payments through the Temporary Assistance for Families in Idaho Program.

Attachment 2.1.2 **State Plan for Early Childhood Program Coordination**

<http://www.healthandwelfare.idaho.gov/DesktopModules/DocumentsSortable/DocumentsSrtView.aspx?tabID=0&ItemID=7649&MIId=10278&wversion=Staging>

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Attachment 2.2 **Public Comments**

No one attended the public meeting and no public comments were received.

Attachment 3.1.1 **Eligibility Policy Manual**

http://www.healthandwelfare.idaho.gov/portal/alias_Rainbow/lang_en-US/tabID_3374/DesktopDefault.aspx

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Attachment 3.5.1 **Sliding Fee Scale for Child Care Services**

ICCP SLIDING FEE SCHEDULE									
FAMILY SIZE	2	3	4	5	6	7	8	9	10
MONTHLY INCOME	PERCENTAGE OF CHILD CARE COST FAMILY MUST PAY								
\$ 0 - \$ 499	7%	7%	7%	7%	7%	7%	7%	7%	7%
\$ 500 - \$ 599	11%	7%	7%	7%	7%	7%	7%	7%	7%
\$ 600 - \$ 699	11%	11%	7%	7%	7%	7%	7%	7%	7%
\$ 700 - \$ 799	11%	11%	11%	7%	7%	7%	7%	7%	7%
\$ 800 - \$ 899	21%	11%	11%	11%	7%	7%	7%	7%	7%
\$ 900 - \$ 999	21%	11%	11%	11%	11%	7%	7%	7%	7%
\$1,000 - \$1,099	21%	11%	11%	11%	11%	7%	7%	7%	7%
\$1,100 - \$1,199	36%	21%	11%	11%	11%	11%	7%	7%	7%
\$1,200 - \$1,299	36%	21%	11%	11%	11%	11%	11%	7%	7%
\$1,300 - \$1,356	66%	21%	21%	11%	11%	11%	11%	7%	7%
\$1,357 - \$1,399	100%	21%	21%	11%	11%	11%	11%	7%	7%
\$1,400 - \$1,499	100%	36%	21%	11%	11%	11%	11%	11%	7%
\$1,500 - \$1,599	100%	36%	21%	21%	11%	11%	11%	11%	11%
\$1,600 - \$1,699	100%	66%	36%	21%	11%	11%	11%	11%	11%
\$1,700 - \$1,706	100%	66%	36%	21%	21%	11%	11%	11%	11%
\$1,707 - \$1,799	100%	100%	36%	21%	21%	11%	11%	11%	11%
\$1,800 - \$1,899	100%	100%	36%	21%	21%	11%	11%	11%	11%
\$1,900 - \$1,999	100%	100%	36%	36%	21%	11%	11%	11%	11%
\$2,000 - \$2,056	100%	100%	66%	36%	21%	21%	11%	11%	11%
\$2,057 - \$2,099	100%	100%	100%	36%	21%	21%	11%	11%	11%
\$2,100 - \$2,199	100%	100%	100%	36%	21%	21%	11%	11%	11%
\$2,200 - \$2,299	100%	100%	100%	36%	21%	21%	21%	11%	11%
\$2,300 - \$2,399	100%	100%	100%	66%	36%	21%	21%	11%	11%
\$2,400 - \$2,406	100%	100%	100%	66%	36%	21%	21%	21%	11%
\$2,407 - \$2,499	100%	100%	100%	100%	36%	21%	21%	21%	11%
\$2,500 - \$2,599	100%	100%	100%	100%	36%	21%	21%	21%	11%
\$2,600 - \$2,699	100%	100%	100%	100%	66%	36%	21%	21%	21%
\$2,700 - \$2,756	100%	100%	100%	100%	66%	36%	21%	21%	21%
\$2,757 - \$2,799	100%	100%	100%	100%	100%	36%	21%	21%	21%
\$2,800 - \$2,899	100%	100%	100%	100%	100%	36%	21%	21%	21%
\$2,900 - \$2,999	100%	100%	100%	100%	100%	36%	36%	21%	21%
\$3,000 - \$3,099	100%	100%	100%	100%	100%	66%	36%	21%	21%
\$3,100 - \$3,106	100%	100%	100%	100%	100%	66%	36%	21%	21%
\$3,107 - \$3,199	100%	100%	100%	100%	100%	100%	36%	21%	21%
\$3,200 - \$3,299	100%	100%	100%	100%	100%	100%	36%	36%	21%
\$3,300 - \$3,399	100%	100%	100%	100%	100%	100%	66%	36%	21%
\$3,400 - \$3,456	100%	100%	100%	100%	100%	100%	66%	36%	21%
\$3,457 - \$3,499	100%	100%	100%	100%	100%	100%	100%	36%	21%
\$3,500 - \$3,599	100%	100%	100%	100%	100%	100%	100%	36%	36%
\$3,600 - \$3,699	100%	100%	100%	100%	100%	100%	100%	36%	36%
\$3,700 - \$3,799	100%	100%	100%	100%	100%	100%	100%	66%	36%
\$3,800 - \$3,806	100%	100%	100%	100%	100%	100%	100%	660%	36%
\$3,807 - \$3,899	100%	100%	100%	100%	100%	100%	100%	66%	36%
\$3,900 - \$3,999	100%	100%	100%	100%	100%	100%	100%	100%	36%
\$4,000 - \$4,099	100%	100%	100%	100%	100%	100%	100%	100%	66%
\$4,100 - \$4,156	100%	100%	100%	100%	100%	100%	100%	100%	66%
\$4,157 - \$4,199	100%	100%	100%	100%	100%	100%	100%	100%	100%
\$4,200 - \$4,299	100%	100%	100%	100%	100%	100%	100%	100%	100%

Attachment 5.2.1 **Voluntary Early Learning Guidelines**

<http://www.sde.state.id.us/SpecialEd/content/early.asp>

Attachment 5.2.3 **Voluntary Early Learning Materials**

<http://www.sde.idaho.gov/SpecialEd/docs/content/IdahoEarlyLearningStandards.doc>

Attachment 5.2.5

Scope of Work

I General Requirements

- A. The university shall comply with the rules, regulations and policies as outlined by the Department of Health & Welfare (DHW) Child Care Resource & Referral/Professional Development Operations Manual, Temporary Assistance for Needy Families (TANF), Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PWORA), 45 CFR 260, OMB Circulars A-21 and A-133.
- B. The university shall ensure that procedural safeguards are followed in confidentiality requirements according to IDAPA 16.05.01, Protection and Disclosure of Department Records.
- C. The purpose of this contract is to support the goals and objectives of the Idaho Child Care Program, which is to support Goal 5 of the Department's *Strategic Plan*, "Identify and recommend solutions for opportunities to align structures, people and technology while improving communication and customer service in support of the desired outcomes of all other goals."
- D. All work delivered through this scope of work shall be shared with staff, subcontractor, and service providers to assure their knowledge of the expectations and ability to meet contract expectations.
- E. The university, University of Idaho – The Center on Disabilities and Human Development (CDHD), or a subcontractor shall perform the services described in this contract in support of the goal to advance quality, affordability, and accessibility in child care and early childhood education in Idaho.
- F. These services will be provided in accordance with the "Child Care Resource & Referral – Professional Development System Operations Manual" (CC/PDS Operations Manual). Said manual will be jointly developed and mutually agreed upon by the principles to this contract. This manual will be developed and distributed subsequent to the signing of this contract.
- G. Services to be provided include: Professional development; and Child Care Resource and Referral (CCR&R).
- H. Professional Development includes, but is not limited to:
 - 1. Encourage child care provider participation in the professional development system. Provider participation shall be voluntary.
 - 2. Incentives for child care providers, recognizing achievements whether in training, longevity, or performance.
 - 3. Tiered Training.
 - 4. Training shall include education and skill set development for special needs children.
 - 5. Continuously evaluating and revising training offered based on input from providers and parents.
 - 6. A child care provider "rating system".
 - 7. Maintain a case file on trainers
 - 8. Consumer education
 - 9. Utilize the Idaho CareLine as the primary statewide contact number.
 - 10. Equitable and consistent distribution of services statewide.
- I. Child care Resource and Referral includes, but is not limited to:
 - 1. Enrollment and registration of child care providers in the Idaho Child Care Program (ICCP).
 - 2. Referral services.
 - 3. Collect and maintain data on ICCP providers. (Both a paper file and an electronic database using NACCRRAware.)
 - 4. Consumer education.
 - 5. Utilize the Idaho CareLine as the primary statewide contact number.
 - 6. Equitable and consistent distribution of services statewide.
- J. The university shall assure that all service provision is delivered by persons who meet provider Qualifications and provide evidence of licensure, certification, and any other applicable provider qualifications of the Idaho Child Care Program.

II Professional Development System

- A. The Professional Development System will enhance the quality of child care in Idaho by encouraging Continuity of child care and the use of developmentally appropriate and evidence based early Childhood education techniques by child care providers

- B. The Professional Development System will include a provider “rating system” which will provide Parents with information regarding the qualifications of child care providers.
- C. The Professional Development System will reward all types of child care providers who work to improve and refine their skills, which stay in the business, and utilize training received. Child care providers include, but are not limited to;
 - 1. Centers
 - 2. Families
 - 3. Relatives
 - 4. Foster parents
 - 5. Groups
- D. The university shall ensure that the Professional Development system is consumer responsive, timely, culturally sensitive, and uses only best practices materials and high quality trainers. Training shall include education and skill set development for special needs children.
- E. The university shall issue annual cash incentives and recognition certificates identifying provider achievements, whether in longevity, training, or performance.
- F. The university shall continuously gather provider input in developing and revising curriculum for training and the ranking/recognition system.
- G. Training services will be provided or coordinated by the university at times and through methods to accommodate all types of providers. All or some training services may be sub-contracted.
- H. The university shall ensure that a consistent and equitable distribution of services is available statewide. The university shall locate and distribute resources statewide at minimum cost to the provider. Reasonable accommodation will be made for providers who live in remote or rural locations.
- I. The university will maintain a case file of internal providers that will include at minimum:
 - 1. Credentials
 - 2. Trainings given
 - 3. Assessments
 - 4. Evaluations
- J. The university shall collect and disseminate to the providers and general public consumer education Information about the Professional Development system. At a minimum, this includes:
 - 1. Information about the provider “rating system”;
 - 2. Tiered training and incentives; and
 - 3. Participation is voluntary.
- K. The university will recruit providers, encouraging them to participate in the professional development system.
- L. The university shall seek out alternative sources of funding for education and professional development to this project. The university shall employ collaboration efforts that will result in increased efficiency and reduce duplication of services, allowing funds to be used more effectively. The university shall partner with business by educating and prioritizing the importance of quality care for children as it impacts their workforce retention and productivity.

III Child Care Resource and Referral

- A. The services under this contract will improve child care and early childhood education through advancement of quality, accessibility, and affordability.
- B. The university will provide enrollment and registration services for child care providers as required by the rules and regulations of the ICCP.
- C. The university will collect and maintain data in a method specified by the Department, including using the NACCRRAware data program that will be supplied by the Department.
- D. The university will ensure all ICCP provider registration requirements are met and maintain file documentation that support said requirements. Refer to the CC/PDS operations Manual for specifics.
- E. The university will provide a referral process for families seeking child care in Idaho. The referral will include information about the rating system on child care providers. The university will utilize the Idaho CareLine as the primary point of contact for referrals.
- F. The university will recruit child care providers in Idaho to participate in the ICCP program. This shall include recruitment of child care providers for special needs children.

- G. The university shall distribute information related to child care and early childhood education. This information will be culturally sensitive and respectful of the diverse cultural values present in the state.
- H. The university shall ensure that a consistent and equitable distribution of services is available statewide.
- I. The university shall collect and disseminate to the parents and general public consumer education information that will promote informed child care choices. At a minimum, this includes:
 - 1. Information regarding the full range of provider services available;
 - 2. Health and safety requirements;
 - 3. Information about the ICCP; and
 - 4. Information about the Professional Development System.

IV Monitoring

- A. The Department shall monitor the university's service delivery performance. Refer to Appendix B for performance requirements.
- B. The university shall provide to the Department supporting documentation of financial expenditures and services provided under this contract.
- C. The university shall provide to the Department an adequate area in which to work while conducting the review.

V Reports/Records/Documentation

- A. The university shall provide reports as outlined in Appendix D.
- B. The university shall obtain signed consent as appropriate for release of information in order to request records that are deemed necessary.

VI Quality Assurance

- A. In cooperation with the Department, the university shall develop a quality improvement plan that Documents the process to be used in assuring the quality of services provided for each task.
- B. In cooperation with the Department, the university shall submit a written customer service policy that describes how the Departments Customer Service and Strategic plan shall be incorporated into policies and training for their staff.
- C. The university shall meet regularly or as needed with Department staff to discuss individual case status, treatment recommendations, and service responsibilities.

VII Close out

- A. As directed by the Department, the university shall provide a summary of the outcome(s) attained, and recommendation for continued service or changes to provide the most effective outcome for the service.
- B. In the event the university or the Department terminates the contract, all equipment with a current value of \$5,000 or more purchased with contract funds, as well as all applicable fiscal, training, and provider records connected with the ICCP and the Professional Development System shall be returned to a site designated by the Department within two weeks of the contract termination.

VIII Transition Plan

- A. The university shall describe how they will provide a transition plan to facilitate a smooth transition, of the contracted functions, from the university, either back to the Department or to another university designated by the State.



Attachment 5.2.6 Career Lattice and Incentive Structure

IdahoSTARS Career Pathway and Incentive Plan Frequently Asked Questions (March 2007)

What is the overall Goal of the IdahoSTARS Professional Development System?

- To increase the skills and knowledge of individuals working in the early care and education field to improve the quality of child care for the children in Idaho

What are the Guiding Principles of the IdahoSTARS Professional Development System?

- *Year #1* - (March 2004 – February 2005) was to recruit and enroll participants into the system
- *Year #2* - (March 2005 – February 2006) was to encourage participants to begin formal training and education
- *Year #3* – (Beginning March 2006) to emphasize *supporting* providers to move as quickly as possible to the CDA level and *recognize* retention for providers who continue training and education at the higher pathway levels
- Incentives are awards for recognition of increasing skills and knowledge and are available to eligible participants on a first come first serve basis as long as funding is available. Participants in the IdahoSTARS Professional Development System are making an “Investment in Themselves” by taking advantage of the opportunities offered by the program.
- The System provides resources, scholarships and incentives to improve the quality of early care and education in Idaho. The System recognizes training and education through a variety of agencies and programs.
- *Year #4* – (Beginning March 2007) the focus will be moving towards more incentives for child care facilities to increase the quality of care and education they are providing to children and their families. With the *Reaching the STARS – Continuous Quality Improvement Rating System* that had its pilot activities kick off in January 2007 the new focus will be implemented.

What is the purpose of the IdahoSTARS Professional Development System (PDS)?

- To promote early childhood as a profession
- To treat early childhood teachers, especially those providing child care as professionals
- To encourage early childhood teachers to consider themselves as professionals
- To provide a goal-oriented system through which early childhood professionals can increase their knowledge and prestige in the field

What is the Professional Development Registry?

- The IdahoSTARS Professional Development Registry is a voluntary, statewide process to recognize and document the professional achievements of people who work in the early childhood care and education field
- The Registry is designed to track the status, wages, working conditions, employment and education of those working in the early childhood field in Idaho

What is the IdahoSTARS Career Pathway?

The Pathway is a recognition system which places those working in the early childhood field on a career pathway level based on his/her past experiences and education. The IdahoSTARS Career Pathway also outlines what is required in order to move from one level to the next

Who may apply?

Those working in the Early Childhood field that are employed as caregivers, child care providers, teachers, educators, trainers, coordinators, directors, administrators and other advocates for young children and families may apply. The Registry is designed for anyone working with children birth to age eight who is providing direct or indirect services in a variety of settings. After School Child Care Providers are also included in this Registry. Applicants must:

- Be at least 16 years old and working in an early care and education program

- Meet all state and local child care licensing requirements for current position
- Have clock hours of approved training divided between the 9 IdahoSTARS Core Knowledge Categories
- Have certification in Infant/Child CPR and Basic First Aid training if working in a child care setting

If an applicant has a college degree, the degree must be in Early Childhood Education, Early Childhood Special Education or in a field related to early childhood education to be placed at the higher level on the Career Pathway. Other degrees will be accepted but placed at the lower levels.

If an applicant does not have a college degree in Early Childhood or related field, college credits relevant to Early Childhood training and theory will be considered, as will training in early childhood education

Why should I apply?

Once you have received your Professional Development Pathway Certificate, you can use it to...

- Count yourself as a professional in early childhood services in Idaho
- Apply for various scholarships through IdahoSTARS
- Receive incentives as you progress along the career pathway
- Inform parents about your level of professional development as you make decisions about your fees for care and education services
- Attract new families to your program
- Apply for new employment positions in an early childhood program or negotiate for a salary increase with current employer
- Document your level of professional development and areas of expertise
- Plan your future education and career goals

What are the criteria to be eligible for IdahoSTARS Incentives as an *employee of a child care facility*? To be eligible to receive Incentives and Scholarships in the IdahoSTARS System the applicant must be able to respond with a **yes** to **all** of the following:

- Works in a child care setting designed to care for children while parents /guardians work or attend training and
- Works in a program that operates full time and
- Earns \$15.00/hr or less and
- Is regularly scheduled to work directly with children as their caregiver/teacher at least 15 hrs/week or 780 hours in one year

What are the criteria to be eligible for IdahoSTARS Incentives as the *Director/Owner of a child care facility*? To be eligible to receive Incentives and Scholarships in the IdahoSTARS System the applicant must be able to respond with a **yes** to **all** of the following:

- The facility is a child care setting designed to care for children while parent(s)/Guardian(s) work or attend training and
- The facility is a program that operates full time and
- Earns \$15/hour or less and (Note: Directors will be eligible for Training and Academic Scholarships if they exceed the \$15.00/hourly pay rate)
- Is regularly scheduled to work directly in the facility with children, staff, and parents a minimum of 30 hours/week

Why does IdahoSTARS only give cash Incentives to those who provide child care?

The goal of IdahoSTARS is to improve the quality of care that children receive, especially the children of working families. Also, the funds used for the PDS are required by the US Federal Government to support child care settings.

What are IdahoSTARS Scholarship Opportunities?

- IdahoSTARS Scholarships are available only to IdahoSTARS Professional Development Registry Participants who meet the incentive eligibility criteria
- In order to broaden the distribution of incentives available through the IdahoSTARS project, Academic (Degree Seeking through the T.E.A.C.H. ® scholarship program) and Training Scholarships offered to participants are limited to one or the other. Participants can not collect both incentive programs at the same time.
- Academic scholarships are “degree seeking” scholarships outlined in the T.E.A.C.H.® contracts, 3-semesters each, at colleges accredited Early Childhood programs
- Participants may use training scholarships for college courses separate from T.E.A.C.H.®
- Provider Training Modules On-Site – i.e. TIME, DVD Emergent Literacy, and other approved on-line courses
- Mentor services: Apprenticeships, Specific Topics, Accreditation
- Training Scholarships will be limited to a maximum of \$300 per calendar year based on actual cost of training. IdahoSTARS will only pay for IdahoSTARS approved trainings \$25 and over for incentive eligible applicants. Participants can accumulate approved IdahoSTARS trainings costing under \$25 and submit them together once they total \$25 to request a Training Scholarship.
- Academic Scholarships (T.E.A.C.H. ®) will be limited to T.E.A.C.H. ® Incentives only. T.E.A.C.H. ® scholars are not eligible for the Completion or Recognition Incentives or Training Scholarships. T.E.A.C.H. ®.scholars can move levels with completion of college credits but they will only receive the level move incentive upon the actual completion of their degree.
- Levels 6.0 and above are only eligible for Training Scholarships no Academic Scholarships

What Incentives can I receive? The following incentives are available for those who qualify. (Note the eligibility for T.E.A.C.H. scholars above):

- ***Initial Application Incentive*** for all Pathway Levels – successful application to become part of the IdahoSTARS Registry.
- ***Completion Incentives*** for levels 1.0 – 3.5 - after completion of 15 hours of IdahoSTARS Approved training hours or 1 college credit related to ECE that follows the participant’s Professional Development Plan. If the completion of 15 hours/1 credit makes the participant eligible for a level move, the incentive award would be for the greater amount not both
- ***Recognition Incentive*** for levels 4.0 – 6.3 that have completed a minimum of 15 IdahoSTARS Approved training hours or 1 college credit during the year and have been employed 12 consecutive months in the profession
- ***Recognition Incentive*** for levels 6.4 – 8.0 that have at least 3 years experience working in a child care setting and have completed a minimum of 15 hrs/1 credit ECE related during the current year and have been employed 12 consecutive months in the profession. Recipients must be able to document additional involvement in the profession over the past 12 months. (i.e. is an officer or actively involved in an early childhood professional organization, has conducted training, or is a mentor, or..... etc.)
- ***Level Move Incentives*** for moving to the next level on the Pathway
- ***Academic and Training Scholarships*** are limited to one or the other. (See detailed information above for Scholarship Opportunities)
- ***Facility Enhancement Grants*** are funds that will be awarded to qualifying facilities to improve the areas identified in an Environmental Rating Assessment

How do I become eligible for IdahoSTARS Recognition Incentives?

If you are eligible for incentives and you are not currently under a T.E.A.C.H. ® contract, you would complete a combination of attending or teaching a minimum of 15 hours of IdahoSTARS approved training or completing 1 college credit. Please note that:

- All training must be divided over the 9 IdahoSTARS Core Knowledge Components
- For annual incentives at least 3 training hours must relate to training for inclusion or working with children who have special needs and abilities which would be Component 9
- No more than 25% of the hours can be in a single Core Knowledge Component
- Duplicate trainings will not be accepted
- CPR and First Aid must be current but training hours only count upon initial entry into the Registry
- USDA required yearly training hours will not be counted

What are the 9 Core Knowledge Components?

1. Child Growth and Development
2. The Environment, Curriculum and Practice
3. Character Building and Development
4. Relationships with Families
5. Observing, Recording and Assessing Child Outcomes
6. Program Operation and Administration
7. Professionalism and Leadership
8. Health, Safety and Nutrition
9. Special Needs

What if I attend a training that isn't IdahoSTARS approved?

If you wish to receive IdahoSTARS approved training hours, you must submit the training information to the IdahoSTARS Training Coordinator for a "Post-Approval". Note that Post Approvals will only be considered for trainings attended within two months of the training date. See www.idahostars.org for more information

What if I don't attend a training that I received a Scholarship for?

If a scholarship recipient did not attend the training that they received a scholarship for they are responsible to repay that scholarship. Outstanding account balances with IdahoSTARS/Idaho AEYC must be paid in full within 30 days of being invoiced. Until the balance is paid in full the IdahoSTARS Registry participant will not be eligible for any IdahoSTARS incentives or scholarships including but not limited to: pathway, training & academic scholarships; or other accreditation and enhancement grants.

What if a Person Does Not Agree with the Level of Placement on the Pathway?

If you believe that your education, training, Environmental Rating Scale Measurement, or other documentation should be reconsidered for placement on the Career Pathways at a higher level, you may appeal to the IdahoSTARS Registry Review Committee within 10 days of receiving your placement notification. The committee consists of 3-5 members of the IdahoSTARS Administrative Team. After

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the review, you will receive a letter explaining their findings. If you still believe the assessment was not conducted correctly, an outside mediator will be utilized. The following documents must be presented for an appeal:

- Cover Letter describing why you wish to appeal
- Additional documentation about course content, projects, independent study credits, and other items you feel might be helpful
- Evidence of informal (non-credit) training hours that you have completed in the 9 Core Knowledge Areas



IdahoSTARS Career Pathway (March 1, 2007)

Placement on a Career Pathway Level will be determined by the documentation provided by the applicant

All levels require a current Pediatric CPR and First Aid Certificate if working in a child care setting

Pathway Level	Experience in ECE	Minimum Education With Proof of Additional Training <u>or</u> Education <u>or</u> *Practitioner Rating Assessment	
1.0	no experience	and	No specific training/education in ECE but must meet licensing requirement for position held
1.1 - 1.3	at least 6 months Full Time Equivalent or 1,000 hours	and	High School/GED with proof of at least 15 - 45 hours of IdahoSTARS Approved training <u>or</u> 1 - 3 college credits related to ECE
2.0 - 2.5	at least 12 months Full Time Equivalent or 2,000 hours	and	<p>High School/GED with proof of <u>one or more</u> of the following:</p> <ul style="list-style-type: none"> ♦ 45 - 180 hours of IdahoSTARS Approved training ♦ 3 - 12 college credits related to ECE ♦ 3.0 - 3.8 on an <u>*Practitioner Rating Assessment</u> ♦ IdahoSTARS <u>Basic Child Care Certificate (in development stage)*</u>
3.0			Current Valid Child Development Associate Certificate/CDA
3.1 - 3.4	at least 9 months Full Time Equivalent or 1,500 hours	and	<p>with proof of <u>one or more</u> of the following:</p> <ul style="list-style-type: none"> ♦ 15 - 270 hours of IdahoSTARS Approved training ♦ 1 - 18 college credits related to ECE ♦ 4.2 - 4.8 on the <u>*Practitioner Rating Assessment</u> ♦ CDA w/Apprenticeship
4.0			Technical Certificate
4.1 - 4.4	at least 12 months Full Time Equivalent or 2,000 hours	and	<p>with proof of <u>one or more</u> of the following:</p> <ul style="list-style-type: none"> ♦ 15 + hours of IdahoSTARS Approved training ♦ 1 - 30 college credits related to ECE ♦ 5.2 - 5.8 on the <u>*Practitioner Rating Assessment</u> ♦ Technical Certificate w/Apprenticeship <p>NOTE: Placement will be based upon ECE specific and/or related course work</p>

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5.0			Associate Degree
5.1 - 5.4	at least 24 months Full Time Equivalent or 4,000 hours	and	with proof of <u>one or</u> more of the following: ♦ 45 + hours of IdahoSTARS Approved training ♦ 3 + college credits related to ECE ♦ AA w/Apprenticeship NOTE: Placement will be based upon ECE specific and/or related course work
6.0			Bachelor Degree
6.1 - 6.4	at least 24 months Full Time Equivalent or 4,000 hours	and	with proof of <u>one or</u> more of the following: ♦ 45 hours of IdahoSTARS Approved training ♦ 3 + credits ECE related NOTE: Placement will be based upon ECE specific and/or related course work
7.0	at least 36 months Full Time Equivalent or 6,000 hours	and	Master Degree in any related field
8.0	at least 36 months Full Time Equivalent or 6,000 hours	and	PHD in any related field

***IMPORTANT NOTE - the Early Childhood Certificate Programs are in the development stage and are not available until announced. The Practitioner Rating Assessments can be arranged through your CCR&R office.**

Attachment 5.1.4 **Program Evaluation**

<http://www.healthandwelfare.idaho.gov/DesktopModules/DocumentsSortable/DocumentsSrtView.aspx?tabID=0&ItemID=7648&MI=10278&wversion=Staging>